

44627
COUNTY BOROUGH OF BARNSLEY.



REPORT

OF THE

MEDICAL OFFICER OF HEALTH

(J. A. SCOTT, M.D., D.P.H., Liv.).

FOR THE YEAR 1933.

Barnsley:

E. CHEESMAN LTD., PRINTERS, MARKET HILL.

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1934.

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COUNTY BOROUGH OF BARNSELEY

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

INCLUDING THE

REPORT of the CHIEF SANITARY INSPECTOR

July, 1934.

To the Chairman and Members of the Sanitary Committee:

Gentlemen,

I have the honour to submit the Annual Report on the Health of the Borough and the work of the Public Health Department for the year 1933.

The year has been marked by an outbreak of Influenza in its early months and by the widespread prevalence of Diphtheria of a severe type throughout the year.

The diminution of the number of deaths resulting from, or associated with, child-birth, is particularly pleasing and is an earnest of what can be done by continued attention to this important subject.

Negotiations with the Ministry of Health for the erection of a twenty-bed Maternity Home on the site of the present Municipal Maternity Home have been suspended, pending a statement by the Council of their public health building programme for the next few years. The need for this Home is urgent and it is to be hoped that further steps in the matter will be taken in the near future.

Housing continues to be in the forefront of public health work and the first steps in a vigorous five years' programme have been taken with the New Street (Eastern) Area.

I have pleasure in expressing my thanks for the whole-hearted co-operation and support accorded me during the year by every member of the staff of the Public Health Department—medical, nursing and clerical. I am particularly indebted to Dr. M. W. Blackwood, the Deputy Medical Officer of Health, for invaluable help during the year.

I have the honour to be, Gentlemen,

Your obedient servant,

J. A. SCOTT,

Medical Officer of Health.

Town Hall,
Barnsley.

STAFF.

Medical Officer of Health and Superintendent of Infectious Diseases Hospitals:

J. A. SCOTT, M.D., M.R.C.S., D.P.H.

Deputy Medical Officer of Health:

Margaret W. Blackwood, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health:

Betty M. Kennedy, M.B., Ch.B., D.P.H.

Medical Superintendent—Mount Vernon Sanatorium and Clinical Tuberculosis Officer:

C. Ferguson Walker, B.A., M.D. (Lond.), M.R.C.S., L.R.C.P.;
D.P.H.

Ear, Nose and Throat Specialist:

§ Herbert Tomlin, M.D., Ch.B., D.P.H.

Consulting Gynaecological Surgeon:

§ William W. King, F.R.C.S., M.B., Ch.B., L.R.C.P.

Clinical Venereal Diseases Officers:

§ Harold F. Horne, T.D., M.A., M.D., B.Ch., D.P.H.,

§ John Ryan, M.B., Ch.B.

District Medical Officers and Public Vaccinators:

§ E. W. Blackburn, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P.,
D.P.H.

§ V. K. Blackburn, M.R.C.S., L.R.C.P.

§ J. P. MacMahon, L.R.C.P. & S.

§ J. L. Elliott, L.S.A., L.M.S.S.A.

§ E. B. Collings, M.R.C.S., L.R.C.P.

Orthopaedic Surgeon:

§ H. L. Crockatt, M.B., Ch.B.

Senior Dental Officer:

A. G. Moxon, L.D.S.

§ Part-time Officers.

Matron—Kendray Isolation Hospital:

Miss E. A. Bissett.

Matron—Mount Vernon Sanatorium:

Miss A. Kerr.

Matron—Municipal Maternity Home:

Miss C. M. Sharpe.

Health Visitors:

- | | |
|-------------------------|------------------------|
| *a Miss A. Petford | †x* Miss E. M. Garnett |
| *x Miss F. Hinchliffe | *x Mrs. A. Hudspith. |
| *x† Miss S. E. Melling. | *x Miss S. A. Batty |
| *x† Miss T. M. Inns | (resigned 31/12/33). |
| *x† Miss A. Steedman | |

Municipal Midwife:

Mrs. M. Jones (appointed 1/4/33).

Tuberculosis Nurses:

- | | |
|---------------------|----------------|
| *† Miss M. Connolly | * Mrs. V. Tong |
|---------------------|----------------|

X-Ray and Ultra-Violet Light Nurse:

* Miss M. S. Taylor.

Mental Deficiency Nurse:

* Miss S. A. Wain.

Clerical Staff—Medical Officers Department:

Bernard Payne, Chief Clerk.

Miss J. Henderson, M. & C.W. Clerk (resigned 2/12/33).

Miss A. Brailsford, M. & C.W. Clerk (appointed 4/12/33).

Miss E. Jackson, Typist.

Miss M. Jordan, Clerk.

Miss H. Jagger, Junior Clerk (appointed 4/12/33).

Miss E. Rankin, Dental Attendant.

BLIND WELFARE DEPARTMENT.**Assistant Superintendent:**

R. R. Hanlon.

Visitors:

- | | |
|----------------------|----------------------|
| z Miss Mary Jackson | z Mrs. C. Womersley. |
| (resigned 11/2/33). | Miss L. Parker. |
| z Miss D. G. L. Hall | |
| (appointed 13/2/33). | |

VACCINATION OFFICER:

§ Thomas Corbett.

VETERINARY SURGEON:

§ C. Secker Smith, M.R.C.V.S., F.E.V.M.S.

MEDICAL ORDERLY:—Venereal Diseases Clinic:

E. Goddard.

§ Part-time Officers.

* Trained Nurse. a L.O.S. Certificate. x Certified Midwife.

† New Health Visitors Certificate. ‡ Tuberculosis Certificate.

z Certified Home Teachers.

SANITARY DEPARTMENT—STAFF.**Chief Sanitary Inspector and Cleansing Superintendent:**

†*§ John W. Mellor, M.R.S.I., F.S.I.A., M.Inst.P.C.

Assistant Sanitary Inspectors:

† F. J. Turner, C.R.S.I., M.S.I.A.

†* W. H. Spalton, C.R.S.I., M.S.I.A.

†* A. Pemberton, C.S.I.B., M.S.I.A.

†* C. Henderson, C.S.I.B., M.S.I.A.

J. Pickering, M.S.I.A.

F. Winder, C.S.I.B.

Assistant Cleansing Inspector:

J. Brownbridge.

Clerical Staff:

E. Sheldon, C.S.I.B., Chief Clerk.

§ G. F. Mellor, A.M.Inst.P.C., Clerk.

H. Hepplewhite, Junior Clerk.

D. R. Worrall, Junior Clerk.

Miss M. Hesp, Typist.

Miss M. Guest, Junior Typist.

† Certified Meat and Other Foods Inspector.

* Certified Smoke Inspector.

§ Diploma Institute of Public Cleansing.

SANITARY COMMITTEE.

Chairman—Councillor J. F. Broley, J.P.

Vice-Chairman—Councillor H. Snowden.

His Worship the Mayor—Councillor J. Guest, J.P.

Alderman H. Smith.	Councillor G. Mason.
„ S. Trueman.	„ H. Potter.
„ A. Wright.	„ J. Richards.
Mrs. Councillor L. J. Soper.	„ E. Sumnall.
Councillor H. Burgin.	„ W. J. Taylor.
„ A. Jepson.	„ P. O. Walker.

The form of the Report is as outlined in Circular 1346 of the Ministry of Health, 2nd October, 1933.

1.—STATISTICS AND SOCIAL CONDITIONS OF THE DISTRICT.

Area (Census 1931)	.....	6,036 acres
Population (Census 1931).....	.....	71,522
Population (Middle 1933).....	.....	71,600
Number of inhabited houses (end of 1933, according to Rate Books)	.....	17,460
Rateable Value	.....	£317,067
Sum represented by a Penny Rate		£1,209

SOCIAL CONDITIONS.

The main local industries are coal mining, metal working, transport, glass, linen, shirt-making and paper manufacture, all of which to a greater or lesser degree have suffered during the year from trade depression.

2.—EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

	Total	Males	Females	
Live Births—				
Legitimate	1,217	637	580	Birth Rate per 1,000 population—17.31
Illegitimate	57	33	24	
Still Births—				
Legitimate	59	32	27	Rate per 1,000 total live and still births 44.26
Illegitimate	—	—	—	
Deaths	951	492	459	Death Rate per 1,000 population—13.28
Deaths from Puerperal Causes—			Rate per 1,000 total live and still births	
Puerperal Sepsis			1	0.75
Other Puerperal Causes			4	3.00
Deaths of Infants under one year of age—				
All Infants per 1,000 live births				93
Legitimate Infants per 1,000 legitimate live births				92
Illegitimate Infants per 1,000 illegitimate live births				105
Deaths from—				
Measles (all ages)				1
Whooping Cough (all ages)				3
Diarrhœa (under 2 years of age)				6

COMMENTS ON VITAL STATISTICS.

POPULATION.

The Population at the Census 1931 was 71,522, and is estimated by the Registrar General to be 71,600 for the mid-year 1933.

There were in the year 1932, an excess of 593 births over deaths and in the year 1933, an excess of 323 births over deaths. Taking the two years natural increase, from April, 1931, to mid-year 1933 (the date of the Registrar General's estimate), there has been a natural increase in the population of about 900, but, as the Registrar General's estimate of the increase in this period is 378, there has, presumably, been an emigration of about 500 people from the town and no immigration into the town during this period.

BIRTHS.

There were 57 illegitimate and 1,217 legitimate live births registered during the year, giving a Birth Rate of 17.31. The Birth Rate has consistently been higher than that of the country as a whole, but has shown a tendency to decrease at the same rate as that of the country—thus in 1921 the Birth Rate for England and Wales was 22.4, and for Barnsley 29.1, and in 1933 the Birth Rate for the country as a whole, is 14.4, that for the Borough being 17.31. There has been a decrease in the Birth Rate of 2.34 per 1,000, compared with the figures for the previous year.

STILLBIRTHS.

Altogether 59 (legitimate) stillbirths were registered in Barnsley during the year, giving a rate of 44.26 per 1,000 total births, as compared with a similar rate for the country of 41.

DEATHS.

The total net deaths for the year numbered 951, of whom 492 were males and 459 females. The corresponding figures for the previous year were:—849, 471 and 378 respectively. The Death Rate for the year is 13.28 per 1,000 population, that for England and Wales being 12.3.

CAUSES OF DEATH.

MEASLES AND WHOOPING COUGH.

There was one death from Measles during the year, occurring in a child under one year of age.

Three deaths occurred from Whooping Cough, of which two occurred in children under the age of five years.

Deaths from these two infectious diseases invariably occur from respiratory complications. As in previous years, the question of the treatment of complicated cases of these two diseases at the Kendray Isolation Hospital has received tentative consideration, but it has not yet been possible to take definite steps in the matter. Experimental work in various parts of the world on the treatment of Measles by convalescent serum or, failing this, by the blood serum of adults, has continued, but it has not been possible to use this definite advance in treatment locally.

SCARLET FEVER.

No death occurred from this cause. Further comments on this disease will be found under the section dealing with its treatment at Kendray Hospital.

DIPHTHERIA.

Fourteen deaths occurred from this cause, four deaths occurring under the age of five years and ten under twenty-five years.

There has been during the year not only a large increase in the total number of cases, owing to the epidemic prevalence of this disease, but a marked increase in the severity of the cases owing to the prevalence of the Gravis type of organism, described by the Leeds workers. Further reference to this disease will be found under the section dealing with its treatment at Kendray Hospital.

TUBERCULOSIS.

Forty males and eighteen females died of Tuberculosis of the Respiratory System during the year, one case being under the age of fifteen years and nine cases under the age of twenty-five years.

Six males and six females died of Tuberculosis affecting other systems of the body.

The Death Rate for Respiratory Tuberculosis was 0.81, as compared with 0.70 in 1932: the corresponding Rate for Non-pulmonary Tuberculosis in 1933 was 0.16, and in 1932, 0.19.

INFLUENZA.

An extensive outbreak of Influenza commenced on Boxing Day, 1932, and prevailed for six or seven weeks at the beginning of 1933. Twenty-three males and twenty-nine females are registered as having died from this cause during the year. Many of the deaths from bronchitis and pneumonia are probably of influenzal origin also.

RESPIRATORY DISEASES.

Fifty-four deaths, as compared with thirty-four in the previous year, occurred from Bronchitis, and ninety-one, as compared with eighty-one in the previous year, from Pneumonia. Thirty-five of the ninety-one deaths from Pneumonia occurred in children under one year of age. There were, in addition, eight other deaths from Respiratory Diseases, giving a total Respiratory Disease Death Rate of 2.13, compared with 1.69 in the previous year. This marked increase is also due to the epidemic of Influenza which prevailed in January and February.

ENCEPHALITIS LETHARGICA.

Three deaths took place from this cause during the year, compared with no death in 1932.

CANCER.

One hundred deaths, as compared with seventy-six in the previous year, occurred from this cause, giving a Death Rate of 1.39 per 1,000 population. The sites affected were:—

	Males	Females	Total
Intestines	20	22	42
Stomach	9	8	17
Breast	—	9	9
Nose, Mouth, Throat	6	1	7
Cervix: Uterus: Vagina	—	10	10
Liver	3	1	4
Lung	3	—	3
Kidney	1	2	3
Ovary	—	2	2
Heel	1	—	1
Neck	1	—	1
Spine	1	—	1
	<hr/> 45	<hr/> 55	<hr/> 100

CEREBRAL HÆMORRHAGE.

Twenty-eight male and twenty-three female deaths, a total of fifty-one, occurred from this cause. Thirty-eight occurred in people over the age of 65 years.

HEART DISEASE.

This has again been the commonest cause of death during the year, 183 deaths, eighty-seven male and ninety-six female, having occurred from this cause, as compared with 163 in the previous year. 145 of these deaths occurred after the age of 55.

OTHER CIRCULATORY DISEASES.

This group of diseases, mainly affecting the blood vessels, has been responsible for fifty-three deaths.

CONGENITAL DEBILITY, PREMATURE BIRTH, MALFORMATIONS. Etc.

All the forty-four deaths from these causes have taken place under the age of one year. This group represents 37% of the total deaths of infants under one year.

DEATHS FROM PUERPERAL SEPSIS AND OTHER PUERPERAL CAUSES.

One death occurred from Puerperal Sepsis and four from Other Puerperal Causes, giving rates of 0.75 and 3.00, with a total maternal mortality rate of 3.75 per 1,000 total births. The corresponding maternal mortality rate for 1932 was 5.30, and for 1931 6.63, the rate for the country being 4.23. This diminution in the most tragic cause of death, whether related or not to the local efforts made to combat it, is particularly pleasing.

TABLE 1.
Vital Statistics of the County Borough of Barnsley during 1933 and the preceding 10 years.

Year.	Total Population Civil and Military Estimated to the middle of the year		Nett Births.		Civilian Popu- lation only.	Nett deaths at all ages		Nett Deaths in Public Institutions		Nett Deaths under 1 year of age.		Nett deaths under 1 year	Nett deaths under 5 years	Zymotic Death Rate	Influenza included
	Num- ber	Rate	Num- ber	Rate.		Num- ber.	Rate.	Per cent. of Total Nett Deaths							
1923	70120	1747	24.91	70120	860	12.26	213	170	97	19.77	30.23	1.44			
1924	70570	1872	26.53	70570	968	13.72	284	184	98	19.01	29.24	1.69			
1925	71170	1684	23.66	71170	984	13.82	190	181	107	18.39	28.15	1.69			
1926	70760	1676	23.69	70760	809	11.43	233	140	84	17.31	25.22	1.00			
1927	73790	1535	20.80	73790	935	12.67	285	151	98	16.15	31.02	1.69			
1928	71080	1578	22.20	71080	821	11.55	233	132	84	16.08	21.31	0.62			
1929	71700	1517	21.34	71700	1092	15.36	281	183	121	16.76	26.92	1.91			
1930	71700	1479	20.63	71700	811	11.31	188	104	70	12.82	17.01	0.56			
1931	72160	1356	18.79	72160	996	13.80	263	149	109	14.96	25.50	1.03			
1932	71900	1442	20.05	71900	849	11.80	220	123	85	14.48	20.26	0.87			
Average for 10 yrs 1923-32	71495	1588	22.26	71495	911	12.77	239	151	97	16.57	25.48	1.24			
1933	71600	1274	17.31	71600	951	13.28	266	119	89	12.51	17.13	1.08			

TABLE 2.
 BIRTH RATES, DEATH RATES, and ANALYSIS OF MORTALITY during the Year 1933.
 (Provisional Figures.)

	Rate per 1,000 Population.		Annual Death Rate per 1,000 Population.									Death Rate per 1,000 Live Births.		Percentage of Total Deaths			
	Live Births.	Still-Births.	All Causes.	Typhoid and Para-Typhoid	Small-pox	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under 2 yrs.)	Total Deaths under one yr.	Certified by Registered Medical Practitioners	Inquest Cases	Certified by Coroner after P.M. No Inquest	Uncertified Causes of Death
England and Wales ...	14.4	0.62	12.3	0.01	0.00	0.05	0.02	0.05	0.06	0.57	0.54	7.1	64	90.9	6.3	1.9	0.9
118 County Boroughs & Great Towns (including London) ..	14.4	0.67	12.2	0.00	0.00	0.06	0.02	0.06	0.08	0.55	0.49	9.4	67	91.0	6.0	2.5	0.5
132 Smaller Towns ..	14.5	0.63	11.0	0.00	0.00	0.04	0.02	0.04	0.04	0.53	0.44	4.9	56	91.7	5.8	1.5	1.0
Barnsley C. B. ..	17.31	0.82	13.28	0.02	0.00	0.01	0.00	0.04	0.19	0.72	0.40	4.71	89	92.0	7.04	1.05	0.0

The maternal mortality rates for England and Wales are as follows:

Puerperal Sepsis.
Others.
Total.

per 1,000 Live Births ...
1.79
2.63
4.42

,,
,,
Total Births ...
1.71
2.52
4.23

,,
,,
Live Births ...
0.80
3.14
3.94

,,
,,
Total Births ...
0.75
3.00
3.75

,,
,,
,,
Barnsley
,,
,,

TABLE 3. REGISTRAR GENERAL.

Deaths under 1 year	{	Males ...Legitimate,	65	Illegitimate,	4	Total	69
		Females ...	48		2		Total	50

Causes of Death at different Periods of Life in the County Borough of Barnsley.

[illegible]

TABLE 4.
INFANT MORTALITY.

Causes of Death.	Under 1 week.	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks.	4 wks. and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months	Total Deaths 1933.
	Under 1 week.	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks.	4 wks. and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months	Total Deaths 1933.
All Causes—Certified ...	36	4	5	4	49	22	20	8	20	119
Uncertified ...	...	...	...	...	...	...	...	...	...	...
Acute Oedema of Lung ...	...	...	...	...	...	...	1	...	...	1
Asthenia and Bronchitis ...	1	...	...	...	1	...	...	...	...	1
Atelectasis ...	2	...	...	...	2	...	...	...	...	2
Bronchitis ...	...	...	...	1	1	3	5	1	...	10
Convulsions ...	...	...	...	...	...	1	2	...	...	3
Convulsions and Bronchitis ...	...	...	...	...	...	1	3	...	...	4
Convulsions and Pneumonia ...	...	...	...	...	...	...	...	...	1	1
Congestion of Brain and Bronchitis ...	...	...	...	...	...	...	...	...	2	2
Congenital Debility & Malformation ...	5	1	1	...	7	2	...	...	...	11
Debility ...	1	...	...	...	1	...	2	...	...	3
Diarrhoea ...	...	...	...	...	...	...	1	1	...	3
Diarrhoea and Convulsions ...	...	...	...	...	...	1	1	...	1	3
Diarrhoea and Bronchitis ...	...	...	...	...	...	1	1	...	...	2
Erysipelas & Streptococcal Meningitis ...	...	...	...	...	...	...	1	...	...	1
Influenza ...	...	...	...	...	...	...	1	...	...	1
Influenzal Pneumonia ...	...	...	...	...	...	...	...	...	1	1
Icterus Neonatorum ...	...	1	...	...	1	...	1	...	...	2
Intestinal Obstruction ...	...	...	...	...	...	...	...	...	...	1
Intra-cranial Haemorrhage ...	1	...	...	...	1	...	...	...	...	1
Maldevelopment ...	1	...	...	...	1	...	...	...	...	1
Melæna Neonatorum ...	1	...	...	...	1	...	...	...	...	1
Marasmus ...	...	1	...	...	1	...	...	...	...	1
Measles ...	...	...	...	...	...	...	1	...	...	1
Osteomyelitis ...	...	...	...	...	...	...	1	...	...	1
Pneumonia (all forms) ...	...	...	1	...	2	5	2	4	8	21
Pneumonia and Bronchitis ...	...	...	...	1	2	4	...	1	1	6
Pneumonia and Meningitis ...	...	...	...	...	...	...	...	...	2	2
Pneumonia and enlarged Thymus ...	...	...	...	...	...	1	...	...	1	1
Pneumococcal Meningitis ...	...	...	...	...	...	1	...	...	1	2
Prematurity ...	22	...	2	2	26	...	...	...	...	26
Pemphigus ...	...	...	1	...	1	...	...	...	...	1
Septic Meningitis and Erysipelas ...	...	...	...	...	...	...	...	1	...	1
Syphilis (Congenital) ...	2	1	...	...	3	1	...	...	...	4
Tubercular Meningitis ...	...	...	...	...	...	...	...	...	2	2
Totals ...	36	4	5	4	49	22	20	8	20	119

Nett Births registered during the calendar year:

Legitimate 1,217
 Illegitimate 57

1,274

Nett Deaths registered during the calendar year:

Legitimate (Infants) 113
 Illegitimate (Infants) 6

119

TABLE 5.

Inquests held in Barnsley during 1933, and Inquests held on Barnsley Residents who died outside the Borough during 1933.

Cause of Death.	Borough Residents		Residents died outside Borough		Strangers	
	M	F	M	F	M	F
A—Natural Causes.						
Acute Oedema of Lungs ...	...	...	...	...	...	1
Bronchitis ...	3	3	...	...	...	...
Bursting of Abscess in Brain ...	1	...	...	...	...	...
Cancer ...	2	..	...	...	1	...
Cerebral Hæmorrhage ...	...	3	...	...	...	...
Cerebral Abscess ...	1	...	...	...	...	...
Cerebro Spinal Fever ...	1	1	...	...	1	...
Congenital Debility etc. ...	...	1	...	...	...	...
Erysipelas ...	1	...	...	...	...	...
Heart Disease ...	10	5	1	...	...	...
Intestinal Obstruction ...	...	...	...	...	1	...
Intra-cranial Hæmorrhage ...	...	1	...	...	...	...
Melæna Neonatorum ...	1	...	...	...	...	...
Osteomyelitis and General Sepsis ...	...	...	...	...	1	...
Pleural effusion ...	1	...	...	...	...	...
Pneumonia ...	2	2	...	...	...	...
Shock following Abortion ...	...	1	...	...	...	1
Senile degeneration ...	...	...	...	...	1	...
Spinal Tumour ...	1	...	...	...	...	...
Status Epilepticus and Coma ...	1	..	...	...	...	...
Tuberculosis ...	...	...	...	...	1	1
Uraemia and Nephritis ...	2	1	...	...	...	1
B—Violence.						
Burns from Clothing catching Fire	1	...	...	...	...	1
Collision of Motor Vehicles ...	3	...	1	...	...	...
Drowning ...	4	...	...	...	1	...
Falls.. ...	...	1	...	...	1	2
Fall from Bicycle ...	...	...	...	...	2	1
Fall from Tree ...	...	...	...	...	1	...
Fall from Motor Vehicles etc ...	1	...	...	...	...	...
Knocked down by Motor Vehicles	2	3	...	...	3	1
Scalds ...	...	1	...	...	2	1
Struck by Railway Train ...	...	...	1	...	...	...
Suffocation ...	1	...	...	...	...	...
Carried forward ...	39	23	3	...	16	10

TABLE 5.—continued.

Cause of Death.				Borough Residents		Residents died outside Borough		Strangers	
				M	F	M	F	M	F
Brought forward				39	23	3	...	16	10
C—Occupational.									
Burns from explosion in Colliery				...	...	...	...	4	...
Crushed by Tubs in Colliery				...	2	...	...	5	...
Crushed by Waggons				...	1	...	...	1	...
Crushed by fall of roof in Colliery				...	...	2	...	2	...
Fall from Scaffold				...	1	...	...	...	...
D—Suicide.									
Cut Throat				...	...	...	...	1	...
Drowning				...	...	1	1	...	...
Hanged				...	...	...	1	...	...
Poisoned				...	...	...	...	2	...
Struck by Train				...	1	...	...	...	...
Totals				...	44	24	7	...	31 10

TABLE 6.

Vital Statistics of Barnsley for 12 years, compared with
those of England and Wales.

Live Births per 1,000 Total Population.			Deaths per 1,000 living.		Deaths under One year per 1,000 living	
Year.	England and Wales,	Barnsley.	England and Wales.	Barnsley.	England and Wales.	Barnsley.
1922	20·6	26·57	12·9	13·39	77	100
1923	19·7	24·91	11·6	12·26	69	97
1924	18·8	26·53	12·2	13·72	75	98
1925	18·3	23·66	12·2	13·82	75	107
1926	17·8	23·69	11·6	11·43	70	84
1927	16·7	20·80	12·3	12·67	69	98
1928	16·7	22·20	11·7	11·55	65	84
1929	16·3	21·3	13·4	13·5	74	121
1930	16·3	20·63	11·4	11·31	60	70
1931	15·8	18·79	12·3	13·80	66	109
1932	15·2	20·05	12·0	11·80	64	85
1933	14·4	17·31	12·3	13·28	64	89

TABLE 7.

**PRINCIPAL CAUSES OF DEATH IN ORDER
OF FREQUENCY.**

Cause.	No. of Deaths.			Percentage of Total Deaths.	Death Rate per 1,000 inhabitants
	Male	Female	Total		
All Causes	492	459	951	100.00	13.28
1. Heart Disease	87	96	183	19.24	2.55
2. Respiratory Diseases	86	67	153	16.08	2.13
3. Cancer	46	54	100	10.51	1.39
4. Pulmonary Tuberculosis	40	18	58	6.10	0.81
5. Arterio Sclerosis	28	25	53	5.57	0.74
6. Influenza	23	29	52	5.46	0.72
7. Cerebral Hæmorrhage	28	23	51	5.36	0.71

**GENERAL PROVISION OF HEALTH SERVICES IN THE
AREA.**

A.—LOCAL GOVERNMENT ACT, 1929.

The Joint Advisory Committee, consisting of Members of the Council and of the Governing Body of the Beckett Hospital held one meeting during the year and considered the subject of the user of the Municipal Hospital in the event of its appropriation. The main heads of the division of work between the Local Voluntary Hospital and the Municipal Hospital were settled.

POOR LAW MEDICAL OUT RELIEF.

No changes in this service have taken place during the year.

TABLE 8.

DISTRICT MEDICAL OFFICERS.

Name.	Wards.
E. W. Blackburn, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.H.	North South South-West West
V. K. Blackburn, M.R.C.S., L.R.C.P.	Central South-East East
J. L. Elliott, L.S.A., L.M.S.S.A.	Monk Bretton
J. P. J. MacMahon, L.R.C.P. & S.	Ardsley

RELIEF DISTRICTS.

No. 1 District	.....	North, East
No. 2 District	.....	Central, South-East
No. 3 District	.....	Ardsley, Monk Bretton
No. 4 District	.....	South, South-West, West

Through the courtesy of the Public Assistance Officer, Mr. C. Marshall, I am able to insert the following information:—

Number of persons in receipt of out-relief on the	
31st December, 1933	7,185 persons
	representing 2,549 cases (2,234)

Amount of out-relief granted during the year	
ended 31st December, 1933	£60,589 (£50,546)

The figures in brackets are the corresponding totals for 1932.

B. A complete list of the Officers and staff of the Public Health Department will be found at the commencement of this Report.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

The accommodation available to the Council for the Institutional care of mental defectives is at St. Catherine's Certified Institution, near Doncaster, which is owned by the South-West Yorkshire Joint Board for the Mentally Defective. The County Borough is a constituent member of the Joint Board and has the following beds at its disposal:—

Clasification	Allocated according to Population	Occupied 31/12/33
Males.		
High Grade	20	—
Low Grade	3	3
Males under 16 years.		
High Grade	3	2
Females.		
High Grade	15	18
Low Grade	3	2

The Municipal Institution at Gawber Road, in addition, holds the Certificate of the Board of Control for the treatment of ten mental defective males and ten mental defective females. There were at the end of the year twelve males and seven females actually in the Institution, maintained by the Public Health Services Committee of the Corporation.

(1). NURSING IN THE HOME.

(a).—General.

This work is carried on by the County Borough of Barnsley District Nursing Association (two Nurses) and the Ardsley Nursing Association (one Nurse) which have continued their good work throughout the year.

The Barnsley District Nursing Association receives a subsidy from the Corporation of £50. The subsidy is divided between Maternity and Child Welfare (£35) and the nursing of Tuberculosis (£15). The Mayor for the time being acts as President of the Barnsley Association and the Medical Officer of Health is a member of the Executive Committee. Other members of the Corporation are also members of the Nursing Associations.

(b).—Infectious Diseases.

The District Nurses assist in some cases of infectious disease, especially tuberculosis. The Corporation employ three whole-time Tuberculosis Nurses, two of whom devote a considerable portion of their time to visiting cases of tuberculosis in their homes, and giving instructions as directed by the Clinical Tuberculosis Officer. The other Health Visitors also assist in the supervision of cases of measles, whooping cough, and ophthalmia neonatorum, giving minor nursing aid, e.g., the application of antiphlogistine jackets, etc.

(2). NATIONAL HEALTH INSURANCE.

Owing to the courtesy of the Clerk to the Insurance Committee, Mr. J. S. Puddephatt, F.F.I., A.I.S.A., I am able to enclose the following report for 1933:—

“COUNTY BOROUGH OF BARNSELEY INSURANCE COMMITTEE.

The average insured population during the whole of the year was 28,345, a decrease of 326 on the previous year's average. The number of insured persons fell by 1,085 during the last quarter of the year. This fall is in the main attributable to the provisions of the 1932 Act whereby persons now only remain in insurance for a limited period when victims of prolonged unemployment.

There were 676 cases of removal into the Borough and 841 cases of removal out of the Borough notified to the Committee. 101 insured persons temporarily resident in the area found it necessary to apply to an insurance practitioner for treatment. 2,259 names were added to and 3,185 removed from Insurance Practitioners' and Approved Institutions' lists during the year. Official certificate forms issued for the use of practitioners and stamped with the name and address of the practitioner totalled 82,025. 5,193 medical cards were issued or re-issued to insured persons. 1,596 entry cards notifying new title to medical benefit were received from Approved Societies and 2,281 exit cards from the same source notified termination of insurance. 211 insured persons requested to be allowed to change doctor during the year.

The total amount paid by the Committee for the treatment of insured persons in this area to Doctors, Institutions and Chemists was roughly £14,930. The chemists during the year dispensed 106,787 prescriptions and the total cost of these prescriptions was £3,287. The ingredient costs of the chemists accounts were again paid in full and the amount available for payment of dispensing fees permitted a settlement at the rate of 88.68 per cent. The average cost for the year of drugs and appliances per insured person included in doctors' lists and for whom the doctors do not themselves dispense was 32 pence, whilst the prescription frequency per insured person was 4.33. The average cost per prescription was 7.4 pence. Prescriptions for insulin cost £88 6s. 6d., the number of units supplied being 106,400.

A monthly check of prescriptions issued by doctors was made in order to verify the recipients title to benefit, and out of a total of 11,209 scripts checked, 11,152 were verified by the medical register. The remaining 57 queries were found on investigation to be in order.

During the course of the year 13 samples of drugs and appliances were taken for analysis under the Committee's Testing Scheme, and in one case only it was necessary to refer the Analyst's report for consideration of the Pharmaceutical Service Sub-Committee. In this case the Sub-Committee recommended that the Chemist's attention be called to the necessity for supply of medicines in more nearly accurate containers than the one in which the sample was supplied.

At the close of the year there were 28 Doctors (3 of whom employ an assistant), 1 Approved Institution and 14 Chemists (involving 19 shops) under contract with the Committee.

(3). LABORATORY FACILITIES.

There is no change in this service, all examinations for the County Borough area being conducted at Sheffield University Laboratory.

TABLE 9.

**INFECTIOUS DISEASES. LABORATORY TESTS AND ISSUES OF ANTITOXIN AND
SALVARSAN SUBSTITUTES, BARNSELY COUNTY BOROUGH COUNCIL.**

	For Private Practi- tioners.	For M.O.H. or S.M.O.	For Kendray Hospital.	For Beckett Hospital.	For Muni- cipal Hospital.	For Sana- torium.	For Tubercu- losis Dis- pensary.	For Venereal Diseases Clinic.	For M.&C.W. Clinic.	For Matern- ity Home.	Total.
Diphtheria	177	243	1285	8	4	2	...	...	...	...	1719
Enteric	26	...	6	9	...	...	...	...	..	...	41
Tuberculosis	62	...	6	8	11	67	230	...	...	...	384
Syphilis	47	4	7	148	3	...	...	173	2	...	384
Cerebro-Spinal Fever ... ..	...	...	33	...	...	...	...	...	...	...	33
Examinations for Organisms ... ..	...	...	259	...	1	3	...	...	8	...	271
Totals	312	247	1596	173	19	72	230	173	10	...	2832

Issue of Diphtheria Antitoxin to Private Practitioners ...	...	...	74 doses.
" " " to Beckett Hospital ...	...	...	6 "
" Anti-streptococcus Serum to Private Practitioners	...	...	3 "
" " " to Beckett Hospital	...	...	4 "
" " " to Sanatorium	...	...	2 "
" Salvarsan Substitutes to Private Practitioners ...	...	...	30 "
" " " to Beckett Hospital ...	...	...	19 "

(4). LEGISLATION IN FORCE.

The list of Local Acts, Byelaws, and Regulations in force in the County Borough was given in full in the Report for 1930—Pages 34-38. The following additions have been made since:—

1930. 5th April.	Barnsley Stock Order, 1930.
1930. 5th December.	Regulation of the Trade or Business of a Hide and Skin Dealer.
1932. 17th March.	Cleansing of footways and pavements, the removal of house refuse, and the cleansing of privies, ashpits, and cess-pools, and with respect to Nuisances.
1932. 11th July.	Public Slaughter-house.
1933. 11th January.	Barnsley Stock Order, 1933.

(5). HOSPITALS.

No change has taken place in the Hospital Service, Voluntary or Municipal, of the Borough during the year.

(a). Beckett Hospital, Barnsley.

This is a Voluntary General Hospital, serving the needs of Barnsley and district and subsidized by the County Borough Council, who make an annual grant of £500 towards the Extension Fund. Provision is made for the adults and children, and all classes of medical and surgical work are dealt with—facilities being available for any type of operative surgery. The Institution was established in 1865 and at the close of the year had 153 beds available.

I am indebted to the Secretary-Superintendent, Mr. A. L. Bourne, for the information given below:—

“ In 1933, 3,070 in-patients, 12,151 outpatients, with 82,700 attendances, were dealt with, compared with 3,055, 13,924, and 85,300 respectively in 1932.

The daily average number of in-patients throughout the year was 117.7, compared with 121.4 in 1932.

The total expenditure for the year 1933 was £16,824, compared with £16,571 in 1932.

The Resident Medical Staff consists of one Surgical Officer, one Casualty Officer and one House Physician.

A comparative table of out-patient attendances is appended:

NEW OUT-PATIENTS TREATED.					1931.	1932.	1933.
General, Surgical and Medical	...				1,618	2,775	2,052
Casualties	...	...	...	...	7,040	7,477	5,922
Ophthalmic	...	...	...	...	1,140	1,222	1,275
Massage and Electrical	...	...	...	...	728	702	910
Dental	...	...	...	...	1839	1,748	1,992
Total	...	...	...	...	11,860	13,924	12,151

Total Number of	1931	1932	1933
Out-Patient Attendances	82,250	85,300	82,700
Total cost of each Out-Patient....	2s. 0d.	1s. 9d.	2s. 2d.

Operations performed during the Year:—

Major	.....	.....	.....	.....	1,543	1,768	1,913
Minor	.....	.....	.....	.....	1,218	1,002	1,181

X-ray Department:—

Patients	.....	.....	.....	.....	4,792	3,945	4,395
Number of Radiographs taken	.....	.....	.....	.....	7,949	7,535	8,847
Number of Screens taken	.....	.....	.....	.....	282	291	255

(b). Municipal Institution, Gawber Road, Barnsley.

This Hospital has a staff of 8 Trained Nurses, 12 Assistant Nurses, 4 Male Mental Attendants and 3 Female Mental Attendants. It possesses 125 beds for men, 117 beds for women, of which 4 are maternity beds, and 11 beds for children; a total of 253 beds of which 84 are for mental cases. A general description of the Hospital was given in the Annual Report for 1930.

TABLE 10.

Table showing the classification of the accommodation for sick, maternity and mental cases and the number of beds occupied on the 31st December, 1933.

Classification of Wards.	BEDS.								
	Number of Wards.	MEN.		WOMEN.		CHILDREN (under 16 yrs. of age)		TOTAL.	
		Pro- vided.	Occu- pied.	Pro- vided.	Occu- pied.	Pro- vided.	Occu- pied.	Pro- vided.	Occu- pied.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Medical	6	83	70	72	40	...	...	155	110
Surgical									
Chronic Sick	1	...	...	...	...	8	10	8	10
Children									
Venereal... ..	...	...	...	...	...	...	...	...	...
Tnberculosis ... ..	...	...	...	...	...	...	...	...	...
Isolation ... ..	...	1	...	1	...	...	...	2	...
Maternity... ..	1	...	...	4	1	...	...	4	1
Mental—									
(a) Lunacy Act, 1890	4	41	25	40	28	3	3	84	56
(i) Short Stay... ..									
(ii) Long Stay)... ..									
(b) Mental Treat- ment Act, 1930									
(i) Voluntary ... ..	...	...	...	...	...	...	...	...	...
(ii) Temporary									
Mental Defectives	...	...	...	...	...	...	...	...	...
Other ... ..	...	...	...	...	...	...	...	...	...
Total	12	125	95	117	69	11	13	253	177

In-Patients.

1.	Total number of admissions (including infants born in hospital)	.....	.....	.....	.....	.....	502
2.	Number of women confined in hospital	.....	.....	.....	.....	.....	26
3.	Number of live births	.....	.....	.....	.....	.....	25
4.	Number of still births	.....	.....	.....	.....	.....	1
5.	Number of deaths among the newly-born (i.e., under four weeks of age)	.....	.....	.....	.....	.....	1
6.	Total number of deaths among children under one year (including those given under 5)	.....	.....	.....	.....	.....	2
7.	Number of Maternal deaths among women admitted to Hospital for confinement	.....	.....	.....	.....	.....	Nil
8.	Total number of deaths	.....	.....	.....	.....	.....	121
9.	Total number of discharges (including infants born in hospital)	.....	.....	.....	.....	.....	375
10.	Duration of stay of patients included in 8 and 9 above. Give number of cases whose total stay was for the following periods:—						
	(a) under four weeks	.....	.....	.....	.....	.....	302
	(b) four weeks and under thirteen weeks	.....	.....	.....	.....	.....	120
	(c) thirteen weeks or more	.....	.....	.....	.....	.....	74
11.	Number of beds occupied:—						
	(a) average during the year	.....	.....	.....	.....	.....	177
	(b) highest 190, on 25/2/33.						
	(c) lowest 166, on 2/9/33.						
12.	Number of surgical operations under general anæsthetic (excluding dental operations)	.....	.....	.....	.....	.....	Nil
13.	Number of abdominal sections	.....	.....	.....	.....	.....	Nil

Classification of In-Patients who were discharged from or who died in the Institution during the year ended 31st December, 1933.

DISEASE GROUPS.					Children (under 16 yrs.) of age		Men and Women	
					Dis- charged	Died	Dis- charged	Died
A.	Acute infectious disease	.....	.....	.....	8	—	16	4
B.	Influenza	.....	.....	.....	—	—	17	4
C.	Tuberculosis—							
	Pulmonary	.....	.....	.....	—	—	3	5
	Non-Pulmonary	.....	.....	.....	—	—	1	2
D.	Malignant disease	.....	.....	.....	—	—	9	12
E.	Rheumatism—							
	(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	.....	.....	.....	2	—	11	3
	(2) Non-articular manifestations of so-called "rheumatism" (muscular rheumatism, fibrositis, lumbago and sciatica)	.....	.....	.....	—	—	4	1
	(3) Chronic arthritis	.....	.....	.....	—	—	4	—
F.	Venereal disease	.....	.....	.....	—	—	2	—
G.	Puerperal pyrexia	.....	.....	.....	—	—	—	—
H.	Puerperal fever							
	(a) Women confined in the Hospital	.....	.....	.....	—	—	—	—
	(b) Other Cases	.....	.....	.....	—	—	3	—
I.	Other diseases and accidents connected with pregnancy and childbirth	.....	.....	.....	—	—	—	—
J.	Mental diseases—							
	(a) Senile Dementia	.....	.....	.....	—	—	—	—
	(b) Other	.....	.....	.....	—	—	78	4
K.	Senile decay	.....	.....	.....	—	—	16	21
L.	Accidental injury and Violence	.....	.....	.....	4	—	21	4
In respect of cases not included above:								
M.	Disease of the Nervous System and Sense Organs	.....	.....	.....	1	—	17	2
N.	Disease of the Respiratory System	.....	.....	.....	2	1	8	8
O.	„ „ Circulatory System	.....	.....	.....	—	1	42	39
P.	„ „ Digestive System	.....	.....	.....	6	—	2	3
Q.	„ „ Genito-urinary System	.....	.....	.....	—	—	6	3
R.	„ „ Skin	.....	.....	.....	—	—	13	1
S.	Other diseases	.....	.....	.....	—	—	14	2
T.	Mothers and infants discharged from Maternity Wards and not included in above figures—							
	Mothers	.....	.....	.....	17	1	26	—
	Infants	.....	.....	.....	—	—	—	—
U.	Any persons not falling under any of of the above headings	.....	.....	.....	6	—	16	—
TOTALS					46	3	329	118

(6). INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

The Municipal Maternity Home and the maternity beds at the Municipal Institution are available alike for married and unmarried mothers. Illegitimate infants and homeless children are accommodated by the Public Assistance Committee either at the Children's Home at Ashley House, Barnsley, which contains 24 beds, 12 for boys and 12 for girls, or in the Municipal Institution Nursery, which possesses 16 beds and two cots, 9 for boys and 9 for girls.

The Public Assistance Committee have under consideration the provision of further accommodation for children in a Special Home.

(7). AMBULANCE FACILITIES.

(a) For Infectious Cases.

Two Ambulances are provided by the Hospitals Committee of the Corporation for use in infectious cases. They are kept at Kendray and convey cases to Kendray or Lundwood Hospitals, and, if necessary, home. They are also used, when available, to convey Tuberculous patients and to convey patients to York, en route for the Yorkshire Children's Orthopædic Hospital, Kirbymoorside.

(b) For Non-Infectious and Accident Cases.

Two Ambulances, under the control of the Chief Constable, are provided for this service. During the year they have been used on 2,694 occasions, covering 10,417 miles, as follows:—

Cases withing the Borough	.....	.....	2,574
Cases out of the Borough	.....	.....	120
			<hr/>
			2,694
			<hr/>

These include 16 journeys to Sheffield, 3 to Leeds, 1 to Pontefract, and 100 journeys to villages and Institutions in the district immediately surrounding Barnsley, but outside the Borough boundaries.

Fees received in respect of the use of the Ambulances amount to £86.

No charge is made for the use of the Ambulances within the Borough.

(c) Maternity Patients.

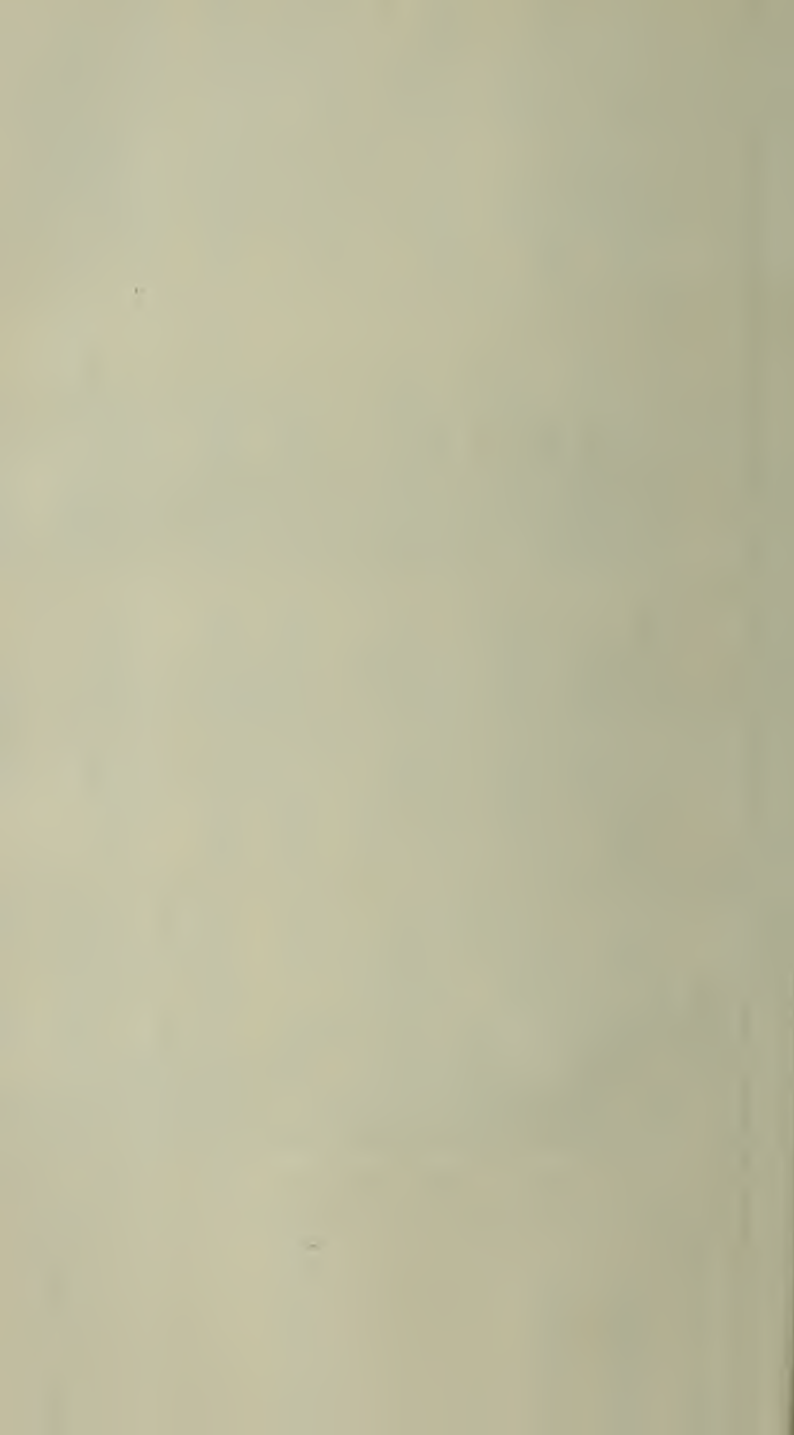
No special provision is made for this class of patient, with the exception that cases of puerperal fever or pyrexia are conveyed to the Hospital by the Kendray Hospital Ambulances.

(8). CLINICS AND TREATMENT CENTRES.

Table 11 below gives full particulars of all Clinics and Treatment Centres.

CLINICS AND TREATMENT CENTRES.

Clinics and Centres.	Situation.	Hours.	Staff.	Accommodation.
ANTE-NATAL.	1 24, Market Street, Barnsley	Monday afternoon— 2-30—4-30	Medical Officer 2 Health Visitors 1 Clerk	Situated on the ground and first floors. Inadequate.
	2 Wesleyan Reform Chapel Schoolroom, Hunningley Lane, Stairfoot	Wednesday morning— 9-30—10-15	Medical Officer 1 Health Visitor 1 Clerk	Situated on the ground floor. Adequate
	3 Wesleyan Methodist Chapel Schoolroom, Harold Avenue, Lundwood	Tuesday afternoon— 2-30—4-30	Medical Officer 1 Health Visitor 1 Clerk	Situated on the ground floor. Adequate
INFANT WELFARE.	1 24, Market Street, Barnsley	Tuesday, Thursday and Friday afternoons— 2-30—4-30	Medical Officer 2 Health Visitors 1 Clerk	Situated on the ground and first floors. Inadequate and overcrowded
	2 Wesleyan Reform Chapel Schoolroom, Hunningley Lane, Stairfoot	Wednesday afternoon— 2-30—4-30	Medical Officer 1 Health Visitor 1 Clerk	Situated on the ground floor. Adequate
	3 Wesleyan Methodist Chapel Schoolroom, Harold Avenue, Lundwood	Wednesday afternoon— 2-30—4-30	Medical Officer 1 Health Visitor 1 Clerk	Situated on the ground and first floors. Inadequate
	4 High Street, Monk Bretton	Fortnightly— Wednesday afternoon— 2-30—4-30	Medical Officer 1 Health Visitor 1 Clerk	No accommodation for perambulators Situated on the first floor Overcrowded at times
MINOR AILMENTS.	1 Agnes Road School Clinic, Barnsley	Daily— 9 a.m. to 5 p.m.	Medical Officer, School Nurses, 2 Clerks	Situated on the ground floor Inadequate and overcrowded
	2 Wesleyan Chapel, Hunningley Lane, Stairfoot	Wednesday— 10-30—12 noon	Medical Officer School Nurse, Clerk	Situated on the ground floor. Adequate
	3 Council Offices, Monk Bretton	Tuesday and Thursday mornings— 9 o'clock to 12 noon	Medical Officer, School Nurse, Clerk	Situated on the first floor
DENTAL.	1 Agnes Road School Clinic, Barnsley	Daily— 9 a.m. to 5 p.m.	Dentist Dental Attendant	Situated on ground floor Inadequate
	2 Wesleyan Chapel, Hunningley Lane, Stairfoot	Tuesday and Friday— 9 o'clock to 12 noon	Dentist Dental Attendant	Situated on ground floor
	3 Council Offices, Monk Bretton	Wednesday— 9 o'clock to 12 noon Friday—2—4 o'clock	Dentist Dental Attendant	Situated on first floor
REFRACTIONS.	Agnes Road School Clinic, Barnsley	Tuesday— 9 a.m. to 12 noon	Medical Officer School Nurse	Situated on ground floor Inadequate
	Agnes Road School Clinic, Barnsley	Wednesday and Friday 9—12 noon	Visiting Surgeon School Nurse	Situated on the ground floor. Inadequate
OPHTHALMIC.	Agnes Road School Clinic, Barnsley	Monday— 9—12 noon	Visiting Surgeon School Nurse	Situated on the ground floor. Inadequate
	Agnes Road School Clinic, Barnsley	2—4 p.m. Once a month	Visiting Surgeon Medical Officer Nurse	Situated on the ground floor. Inadequate
AURAL.	Agnes Road School Clinic, Barnsley	Monday and Thursday 9-30—12 noon (T.B. cases—Adults) Monday and Friday— 1-30—4-30 p.m. (Non T.B. cases—Children) Wed.—1-30—4-30 p.m. (T.B. cases—Children) Sat.—9-30 - 12 noon (T.B. cases—Children)	Visiting Surgeon Medical Officer Nurse	Situated on the ground floor. Inadequate
	Agnes Road School Clinic, Barnsley	Monday and Thursday 9-30—12 noon (T.B. cases—Adults) Monday and Friday— 1-30—4-30 p.m. (Non T.B. cases—Children) Wed.—1-30—4-30 p.m. (T.B. cases—Children) Sat.—9-30 - 12 noon (T.B. cases—Children)	Visiting Surgeon Medical Officer Nurse	Situated on the ground floor. Inadequate
ARTIFICIAL SUNLIGHT.	Agnes Road School Clinic, Barnsley	Monday and Thursday 9-30—12 noon (T.B. cases—Adults) Monday and Friday— 1-30—4-30 p.m. (Non T.B. cases—Children) Wed.—1-30—4-30 p.m. (T.B. cases—Children) Sat.—9-30 - 12 noon (T.B. cases—Children)	Visiting Surgeon Medical Officer Nurse	Situated on the ground floor. Inadequate
	Agnes Road School Clinic, Barnsley	Monday and Thursday 9-30—12 noon (T.B. cases—Adults) Monday and Friday— 1-30—4-30 p.m. (Non T.B. cases—Children) Wed.—1-30—4-30 p.m. (T.B. cases—Children) Sat.—9-30 - 12 noon (T.B. cases—Children)	Visiting Surgeon Medical Officer Nurse	Situated on the ground floor. Inadequate
TUBERCULOSIS DISPENSARY	Queen's Road, Barnsley	Tuesday—10—12 noon 2—4-30 p.m. Thursday—2—4 o'clock 6—8 o'clock MEN :—MEDICAL TREATMENT Mon. 8—10 p.m.	Clinical Tuberculosis Officer 2 Tuberculosis Nurses V.D. Officers Medical Orderly Clerk	Situated on the ground floor Situated on the first floor Adequate
	Queen's Road, Barnsley	Thursdays— 6-30 9-30 p.m. Intermediate Treatment— Daily: 9—11 a.m. 6—8 p.m.	V.D. Officers Medical Orderly Clerk	Situated on the first floor Adequate
VENEREAL DISEASE.	Queen's Road, Barnsley	Thursdays— 6-30 9-30 p.m. Intermediate Treatment— Daily: 9—11 a.m. 6—8 p.m.	V.D. Officers Medical Orderly Clerk	Situated on the first floor Adequate
	Queen's Road, Barnsley	Thursdays— 6-30 9-30 p.m. Intermediate Treatment— Daily: 9—11 a.m. 6—8 p.m.	V.D. Officers Medical Orderly Clerk	Situated on the first floor Adequate
TUBERCULOSIS DISPENSARY	Queen's Road, Barnsley	Tuesday—10—12 noon 2—4-30 p.m. Thursday—2—4 o'clock 6—8 o'clock MEN :—MEDICAL TREATMENT Mon. 8—10 p.m.	Clinical Tuberculosis Officer 2 Tuberculosis Nurses V.D. Officers Medical Orderly Clerk	Situated on the ground floor Situated on the first floor Adequate
	Queen's Road, Barnsley	Thursdays— 6-30 9-30 p.m. Intermediate Treatment— Daily: 9—11 a.m. 6—8 p.m.	V.D. Officers Medical Orderly Clerk	Situated on the first floor Adequate
VENEREAL DISEASE.	Queen's Road, Barnsley	Thursdays— 6-30 9-30 p.m. Intermediate Treatment— Daily: 9—11 a.m. 6—8 p.m.	V.D. Officers Medical Orderly Clerk	Situated on the first floor Adequate
	Queen's Road, Barnsley	Thursdays— 6-30 9-30 p.m. Intermediate Treatment— Daily: 9—11 a.m. 6—8 p.m.	V.D. Officers Medical Orderly Clerk	Situated on the first floor Adequate



(9). MIDWIVES.

There were 31 Midwives practising in the area of the Local Authority during the year 1933.

Mrs. M. Jones, was appointed Municipal Midwife for the Ardsley district on the 1st April, 1933. This district is one in which handywomen do a good deal of work and the appointment should help to overcome this.

No Midwife was suspended on account of infection during the year 1933. One Midwife who was under suspension from the previous year was allowed to resume practice following three negative throat swabs.

The district Branch of the Midwives' Institute has continued to hold fortnightly or monthly meetings during the winter. Attendances on the whole were good, particularly those of Midwives from districts just outside the Borough, and a considerable amount of good work has been accomplished.

C. MATERNAL MORTALITY.

It is possibly a coincidence that the considerable amount of attention which has been devoted in the district to the subject of maternal mortality has been accompanied by a striking fall in the Maternal Mortality Rate during 1933. One death occurred from Puerperal Sepsis and four from Other Puerperal Causes, giving rates per 1,000 total births of 0.75 and 3.00 respectively, and a total Maternal Mortality Rate of 3.75. The corresponding rate for England and Wales is 4.23. This rate compares much more favourably with the country as a whole than has the rate which has prevailed since the War and it is to be hoped that the constant attention of doctors and midwives to this subject, together with the increasing public realisation of its importance, will help to maintain an improvement.

HEALTH VISITING.

This subject is considered on page 89 in the section on Maternity and Child Welfare.

CHILDREN'S ACT, 1908.

There are six foster-parents registered under the Children's Act, 1908.

The six children on the register are regularly visited by the Health Visitors and conditions are satisfactory.

ORTHOPAEDIC TREATMENT.

Full details of the arrangement for Orthopædic treatment are given in the current Annual Report of the School Medical Officer. Details relating to the treatment of children under five years of age are as follows:—

TABLE 12.

SUMMARY OF WORK DONE UNDER THE**ORTHOPÆDIC SCHEME, 1933.**

Children under the age of five years.

Inspections at Clinics.

Visits of Orthopædic Surgeon	8
------------------------------	-------	-------	-------	---

Number of New Cases.

Tubercular	.....	.....	.....	.....	3
Non-Tubercular	.....	.....	.....	.....	24

Number of Re-examinations.

Tubercular					
(under 5 years)	.....	.....	.....	.....	8
(over 16 years)	.....	.....	.....	.....	3

Non-Tubercular

(under 5 years)	.....	.....	.....	.....	81
(over 16 years)	.....	.....	.....	.....	4

Total Number of Examinations	<u>123</u>
------------------------------	-------	-------	-------	-------	------------

TABLE 13.

SUMMARY OF CASES ADMITTED TO THE YORKSHIRE CHILDREN'S ORTHOPAEDIC HOSPITAL, KIRBYMOORSIDE.

Initials.	Age.	Condition.	Admission to Hospital.	Discharge from Hospital.	Condition on Discharge.	Result.
O.S. ...	4 years	Tb. Spine	22/7/32	24/5/33	Jones Spinal Support	Walks fairly well
R.G. ...	2 $\frac{3}{4}$ "	Double Club Foot	9/1/33	8/3/33	Plaster Boots	Satisfactory
J.G. ...	3 "	Acute Rickets	3/3/33	28/4/33	—	Marked general Improvement
I.D. ...	2 $\frac{1}{2}$ "	Acute Anterior Poliomyelitis—Left Arm	15/9/33	6/10/33	Fairbank Frame	Improvement satisfactory
T.W. ...	4 "	Tb. Knee (right)	4/11/32	Still in Hospital	—	—
S.A.R.	4 $\frac{1}{2}$ "	Tb. Spine	5/12/32	Still in Hospital	—	—
A.S. ...	4 "	Tb. Hip (left)	19/5/33	Still in Hospital	—	—
A. McG.	4 "	Tb. Knee	15/9/33	Still in Hospital	—	—
J.S. ...	4 "	Tb. Hip (left)	20/10/33	Still in Hospital	—	—

TABLE 14.
SUMMARY OF CASES UNDER FIVE YEARS OF AGE
SEEN BY ORTHOPÆDIC SPECIALIST.

Tubercular Cases—				New Cases.	Re-Exams.
Tb. Spine	.....	.....	.....	1	4
Tb. Hip	.....	.....	.....	1	—
Tb. Knee	.....	.....	.....	1	5
Tb. Ankle	.....	.....	.....	—	—
Total Tb. Cases				3	9
Non-tubercular Cases—					
Deformities due to Rickets	.....	.....	.....	15	8
Spinal Curvature	.....	.....	.....	1	2
Paralysis	.....	.....	.....	4	4
Hip Deformities	.....	.....	.....	3	1
Deformities of Upper Limbs	.....	.....	.....	1	2
Spina Bifida	.....	.....	.....	1	3
Conditions due to General Weakness	.....	.....	.....	1	—
Foot Deformities	.....	.....	.....	2	6
Total Non-Tb. Cases....				28	26
Grand Total				31	35

66

TABLE 15.
SUMMARY OF ADVICE GIVEN.

Requiring Hospital Treatment at Kirbymoorside	.....	.....	4
Adjustments to Boots	.....	.....	2
Referred for Remedial Exercises	.....	.....	1
„ Massage and Manipulation	.....	.....	2
„ Observation	.....	.....	16
„ U.V. Light Treatment	.....	.....	14

(10). MATERNITY AND NURSING HOMES.
NURSING HOME REGISTRATION ACT, 1927.

Only one Nursing Home is registered under the Nursing Homes Registration Act of 1927. This was inspected during the year and found to be satisfactory. No new applications for registration were received.

SANITARY CIRCUMSTANCES OF THE AREA. WATER.

Sufficient progress has been made with the Royd Moor Reservoir during the year and with the intakes and filtration plants to enable it to be used, if required, in 1934.

The good quality of the water has been maintained and confirmed by regular satisfactory analyses.

The quantity of the supply gave rise to repeated concern owing to the drought and was maintained in full only through the assistance of an outside Authority from whom water was bought. The only restrictions necessary were the prevention of garden watering and the use of hose-pipes. This and the issuing of appeals for economy led to a definite reduction in the demand and to the avoidance of waste without the necessity of curtailing the supply. The year, as a whole, was not abnormally dry but the ten months from March to December were particularly dry, the total rainfall in this period being the lowest on record, except for the years 1887 and 1921. At one time in October the reservoirs were only 22% full and even at the end of the year were filled to only 25% of their capacity.

I am indebted to the courtesy of Mr. J. R. Fox, M.Inst.C.E., Waterworks Engineer and Manager, for the following Table of Rainfall:—

TABLE 16.
BARNSELEY CORPORATION WATERWORKS.
RAINFALL DURING 1933.

1933.	Barnsley Jordan Hill		Midhope
	Inches		Inches
January	1.45	4.32
February	4.81	6.03
March	2.12	2.80
April	1.09	1.43
May	2.32	2.32
June	0.97	2.53
July	1.77	2.75
August	0.41	0.78
September	2.17	2.21
October	4.09	5.58
November	1.97	2.47
December	0.38	0.59
Total		<u>23.55</u>	<u>33.81</u>

DRAINAGE AND SEWERAGE.

The only extensions to the sewerage have been short ones to meet building developments on Huddersfield Road and on Doncaster Road, Ardsley. The report of the Sewage Works Manager is printed separately.

RIVERS AND STREAMS.

Owing to the abnormally dry weather, no flooding of houses in the low-lying portion of the town, such as occurred in May, 1932, has been encountered. As reported last year, a special bank has been erected on the River Dearne by the Borough Engineer with a view to preventing a recurrence of this trouble.

PRIVATE STREET WORKS.

I am indebted to the courtesy of Mr. H. Taylor, A.M.Inst.C.E., Borough Engineer and Surveyor, who has supplied me with the following information and that relating to Drainage and Sewerage:—

“One private front street and five back roads, or secondary means of access to buildings, have been made up during the year 1933, having a total length of 679 yards and at a total cost of £1,460.”

I am also indebted to Mr. Taylor for the following statements shewing the number and description of buildings for which plans have been presented for approval since 1900, and the number of buildings actually erected.

**BUILDINGS FOR WHICH PLANS HAVE
BEEN PRESENTED FOR APPROVAL.**

Year.	Set of Plans Deposited.	Villas, Houses, and Cottages.	Shops, including Lock-up Shops.	Public Buildings, including Schools.	Mills, Workshops, Factories, etc.	Buildings of other Descrip- tion, including alterations and additions.	Total number of Proposed Buildings.
1900	95	174	8	3	10	43	238
1901	100	257	10	1	14	45	327
1902	119	269	6	6	10	40	331
1903	135	335	17	3	9	56	420
1904	137	331	10	2	16	56	415
1905	133	215	15	3	16	61	310
1906	93	175	23	4	10	28	240
1907	117	272	39	3	13	35	362
1908	107	257	21	3	20	29	330
1909	124	286	12	4	1	41	344
1910	98	269	9	7	10	38	333
1911	122	226	8	5	3	69	311
1912	103	194	7	.....	36	27	264
1913	82	199	12	5	22	27	265
1914	92	121	8	4	4	52	189
1915	67	80	.....	2	1	48	131
1916	36	.....	3	.....	22	14	39
1917	12	.....	.....	.....	9	3	12
1918	21	.....	.....	.....	9	11	20
1919	52	2	3	.....	28	19	52
1920	63	18	3	2	17	32	72
1921	57	5	3	1	26	18	53
1922	108	42	11	.....	43	18	114
1923	164	182	14	.....	55	30	284
1924	171	239	4	4	35	41	323
1925	190	171	23	3	37	29	263
1926	164	141	11	3	48	22	225
1927	116	66	28	6	56	17	173
1928	95	35	6	4	36	21	102
1929	71	29	18	3	8	56	114
1930	62	30	5	4	2	38	79
1931	69	27	3	6	4	42	82
1932	73	136	1	4	5	27	173
1933	134	256	5	2	2	45	310

BUILDINGS ERECTED AND COMPLETED.

Year.	Villas, Houses and Cottages.	Shops, including Lock-up Shops	Public Buildings, including Schools.	Mills, Workshops, Factories, etc.	Buildings of other Description, including alterations and additions.	Total number of Buildings.
1900	90	2	2	5	28	127
1901	119	4	.....	.....	7	130
1902	148	6	2	9	29	194
1903	285	7	.....	6	34	332
1904	257	3	.....	3	9	272
1905	287	10	4	9	24	334
1906	158	6	1	8	19	192
1907	178	10	3	9	36	236
1908	185	12	1	4	4	206
1909	264	15	2	1	7	289
1910	230	17	5	2	8	262
1911	201	3	2	1	10	216
1912	163	3	7	4	9	186
1913	144	7	1	3	6	161
1914	120	8	5	2	11	146
1915	75	.....	1	2	6	84
1916	7	1	3	.....	1	12
1917	.....	.....	.....	2	.....	2
1918	.....	.....	.....	.....	1	1
1919	.....	2	.....	2	3	7
1920	4	1	1	1	3	10
1921	7	1	.....	4	.....	12
1922	*177	2	.....	1	7	*177
1923	*266	6	.....	10	9	*266
1924	*34	4	1	5	7	*34
1925	*152	10	2	13	5	*152
1926	*435	12	2	3	1	*435
1927	*546	26	5	28	7	*546
1928	*316	12	4	30	9	*316
1929	*155	6	4	4	28	*155
1930	*252	12	3	2	12	*252
1931	*150	4	5	.....	16	*150
1932	*150	.....	7	1	16	*150
1933	189	3	5	6	18	221
	*10					*10

* These figures apply to the houses erected by the Corporation under their Housing Schemes.

WORK OF THE VETERINARY SURGEON.

The following is the Report of the Veterinary Surgeon,
Mr. C. Secker Smith, M.R.C.V.S.:—

“To the Chairman and Members of the Sanitary Committee:

Gentlemen,

I beg to submit my Annual Report of the work done under the Milk & Dairies Order, Tuberculosis Order, and Contagious Diseases Animals Acts, for the year 1933:—

Visits to Cowsheds	.....	95
Inspections of Animals	.....	766
Animals found by Clinical Examination to be affected with Tuberculosis	.....	6
Samples of Milk examined for the presence of Tubercle Bacilli	.....	101
Samples of Milk found to contain Tubercle Bacilli	.....	4
Number of Animals giving Tubercular Milk	.....	2
Number of Animals slaughtered	.....	8
Compensation paid	.....	£52 7s. 6d.

Swine Fever.

Thirty reports were received during the year, but only one case on investigation was confirmed.

Anthrax.

One report was received, which proved to be a case. The carcase was cremated.

I remain, Gentlemen,

Yours faithfully,

C. SECKER SMITH,

Veterinary Inspector.”

REPORT OF THE CHIEF SANITARY INSPECTOR AND CLEANSING SUPERINTENDENT FOR THE YEAR 1933.

To the Chairman and Members of the Sanitary Committee.

Mr. Chairman, Mrs. Councillor Soper, and Gentlemen,

I submit the Annual Report for the year 1933.

As in previous years, the Report is divided into two sections, one dealing with the work of the Sanitary Inspector, covering the period for the twelve months 1st January to the 31st December, 1933; the other shows the work done in the Cleansing Section and covers the period of the financial year, i.e., 1st April, 1933, to the 31st March, 1934.

Sanitary Section.

One of the most important duties discharged by the Inspectorial Staff is the supervision of food supplies. Under this heading can be included Bakehouses, Ice-cream Premises, Slaughterhouses, Cowsheds and Dairies, the Public Market, Shops and Stalls, a modern innovation —the travelling Shop, what are known as Offensive Trade Premises, Fried Fish Shops, Tripe Cleaning Premises, and Gut-scraping Premises. The foods dealt with are many and varied.

Milk as a food has a tradition. It graces our tables daily. It is the food of infants, growing children, adults and invalids. Its importance by the general public, one feels, is not always appreciated. To ensure a safe supply much work is needed, such as the elimination of tubercular cows from milk herds, the exclusion of objectionable organisms which gain access to the milk where clean methods of production are not adopted and the methods of distribution are careless. One cannot lose sight of the fact that sufficient attention is not given by the housewife in storing milk once it has been delivered at the house. Over this, Inspectors have very little supervision.

A reference to the quantity of meat that has been excluded from the market should convey some idea of the work that has been done in connection with our meat supplies.

A quantity of fish, rabbits, fruits and vegetables have also been destroyed as unfit for human food. It is possible for shell-fish to convey Enteric Fever. Various mussel beds on our sea-coast have been closed as a result of unclean shell-fish being obtained from them. The sources of supply of the shell-fish which reach our markets and fish shops, are constantly enquired into.

The past few years have seen a marked advance in the variety of tinned foods that are offered for sale. At one time, meat, fish and milk were practically the only preserved foods put up in tinned containers. To-day, by purchasing tinned goods, we can obtain almost any kind of fruit and vegetables for our table at a time when fresh fruit and vegetables are not in season.

I think it is true to say that the advance is due in no small measure to the efforts of the Cannerymen, who, by research, great care in the selection of raw food materials, improved methods of canning, and efficient sterilization, have been able to preserve these foods, reduce the risk of consumer to a minimum, and at the same time make the industry a commercial proposition.

The remedying of many defects in various kinds of property are recorded in the tables embodied in the Report. It will be noticed that overcrowding has been abated in twenty-three houses. This does not touch the fringe of the known overcrowded conditions in the town.

Public Cleansing Section.

The work done under this Section is fully explained in the body of the Report, where the cost of this service is given in detail.

The staff are deserving of the best thanks I can offer, for they have rendered willing and useful service, and on many occasions have performed very onerous and difficult duties with tact and discretion.

To you, Mr. Chairman, Mrs. Councillor Soper, and Gentlemen, I tender my deep appreciation of the help that you have given me at all times.

I am, Mr. Chairman, Mrs. Councillor Soper, and Gentlemen,

Your obedient servant,

JOHN W. MELLOR,

Chief Sanitary Inspector & Cleansing Superintendent.

TABLE 17.

DETAILS OF INSPECTION WORK.

Dwelling-houses:				Inspec-	Re-in-
				tions	spections
No. Inspected (ordinary)	.....	.....	.....	3,097	4,836
„ re Infectious Disease	.....	.....	.....	618	13
„ re Small Pox Contacts	.....	.....	.....	1	—
„ re Complaints	.....	.....	.....	494	14
„ re Suspected Overcrowding	.....	.....	.....	59	148
„ re Dirty Condition	.....	.....	.....	61	89
Housing Acts, 1925 to 1930:					
No. inspected and particulars recorded	.....	.....	.....	27	684
No. found to be totally unfit for human habitation	.....	.....	.....	8	—
No. found to be not in all respects fit for human habitation	.....	.....	.....	19	—
No. of Defects Found	.....	.....	.....	331	—
No. of houses at which defects were found	.....	.....	.....	27	—
Other Inspections:					
No. of Houses-let-in-Lodgings	.....	.....	.....	19	4
„ Tents, Vans and Sheds	.....	.....	.....	108	28
„ Common Lodging Houses	.....	.....	.....	41	26
„ Schools	.....	.....	.....	10	29
„ Factories	.....	.....	.....	11	5
„ Workshops—Ordinary	.....	.....	.....	43	19
„ Workplaces	.....	.....	.....	1	—
„ Outworkers	.....	.....	.....	3	—
„ Bakehouses—Ordinary	.....	.....	.....	130	15
„ Underground	.....	.....	.....	3	—
„ Cowsheds	.....	.....	.....	188	22
„ Dairies and Bottled Milk Premises	.....	.....	.....	94	9
„ Ice Cream Premises	.....	.....	.....	74	4
„ Slaughterhouses	.....	.....	.....	2,672	—
„ Offensive Trades	.....	.....	.....	55	2
„ Fried Fish Shops	.....	.....	.....	120	20
„ Food Preparing Premises	.....	.....	.....	76	1
„ Cold Storage Premises	.....	.....	.....	59	—
„ Markets	.....	.....	.....	778	—
„ Shops and Stalls re Meat	.....	.....	.....	15,262	—
„ Shops and Stalls re Other Foods	.....	.....	.....	13,119	—

	Inspec- tions	Re-in- spections
No. of Urinals	34	2
„ Stable Premises	6	5
„ Premises re Swine and Other Animals	34	10
„ Premises re Offensive Accumulations	33	8
„ Drains tested with Smoke	1	—
„ Drains tested with Colour	125	24
„ Drains tested with Grenade	134	77
„ Drains Inspected	200	78
„ Sewers Inspected	43	11
„ Street Gullies	10	—
„ Smoke Observations—General	86	—
Special	2	4
„ Cinemas and Theatres	12	6
„ Miscellaneous Visits	230	7
„ Premises re Rats	150	384
Total No. of Defects found	3,643	—
Total No. of Defects found in connection with Houses	3,533	—
No. of Houses affected by Defects	3,325	—

TABLE 18.

**SANITARY IMPROVEMENTS MADE AND DEFECTS
REMEDIED UNDER THE SUPERVISION OF THE
SANITARY INSPECTOR.**

Dwelling-houses:

Doors repaired	16
Coalgrate provided	1
Roofs repaired	149
Ovens and fireplaces repaired	89
Coppers repaired, or renewed, or provided	30
Means of ventilation improved	14
Floors repaired or relaid	47
Yards paved	50
Yard pavements repaired	7
Eaves spouts fixed or repaired	100
Fallpipes fixed or repaired	39
Down spouts disconnected from drains	4
Cleansed and limewashed	19

Freed from vermin	41
Overcrowding discontinued	23
Old sinks repaired	9
New sinks fixed	10
Waste pipes trapped, renewed, or repaired	70
Waste pipe disconnected	1
Waste pipe ventilated	1
Plaster on walls and ceilings repaired	77
External walls repointed	84
Chimney stacks repointed	28
Chimney flues repaired	4
Steps and stairs repaired	6
Window cords renewed	54
Coal stores erected	2

Schools:

Sanitary conveniences improved	3
Water closets provided in lieu of trough closets	16

Factories:

Sanitary Conveniences improved	1
Sanitary conveniences additional provided	4
Sanitary conveniences provided with intervening ventilated space	1

Workshops:

Cleansed and limewashed	12
Abstract fixed	1

Food Preparing Premises:

Cleansed and limewashed	7
Accumulations removed	1
Discontinued	1

Bakehouses:

Cleansed and limewashed	107
Sanitary condition improved	1
Discontinued	5

Common Lodging Houses:

Cleansed and limewashed	22
Sanitary condition improved	1
Nuisances abated	4

[illegible]

Limewashed 52

Cleansed and limewashed	37
Lighting and ventilation improved	8
Floors repaved or repaired	3
Farm yards paved	2
Cows cleansed	7
New dairy provided	1
Milking stool cleansed	1
Ceilings repaired	2
Cowsheds discontinued	1

Cleansed and limewashed	15
Dairy abolished	1

Limewashed	21
Premises improved	1

[illegible]

Limewashed and cleansed	*****	*****	*****	*****	*****	2
-------------------------	-------	-------	-------	-------	-------	---

Freed from rats	35
Premises made rat-proof	6
Baits laid	1,875
Baits eaten	1,175
Rats caught	45

Removed ***** 19

Cinemas and Theatres:

W.C. roof repaired	1
W.C. seats repaired or renewed	2
W.C. Drain cleansed	1
Bolts provided to doors	2
Door re-hung	1
Total number of defects remedied	2,923
Total number of defects remedied for houses	2,675
Total number of houses for which above work was done	2,902

TABLE 19.

IMPROVEMENTS EFFECTED UNDER THE HOUSING ACT, 1930.**Dwelling-houses**

Dry area pavements repaired	3
Gully dishes provided	4
Provided with special store for food	3
Provided with improved means of food storage	24
Roofs reconstructed or repaired	19
Walls outside re-pointed or repaired	81
Gable walls re-pointed	10
Chimneys repaired	20
Provided with additional W.C. accommodation	1
Provided with new sink or other sanitary fitting	1
Provided with paved yards	3
Provided with improved yard pavements	3
Eaves gutters and fallpipes repaired	14
External doors repaired	20
External steps repaired	8
Passage ceilings repaired	2
Internal doors repaired	3
Chimney flashings repaired	1

Living Rooms:

Old windows improved	27
Dampness in walls prevented	13
Walls and ceilings repaired or re-plastered	13
Floors repaired or relaid	31
Old fireplaces repaired	23
Coppers repaired	6
Door repaired	1
Sinks repaired	2

Sleeping Rooms:

Old windows improved	59
Dampness in walls prevented	8
Walls and ceilings repaired or replastered	50
Old fireplace repaired	1
Floors repaired	17
Staircases repaired	6
Guard rails to staircases provided	3
Door repaired	1

Cellars or Basement Rooms:

Floor repaired or relaid	1
Coalgrates provided	3
Cellar drained	1

Sculleries or Wash-kitchens:

Old windows improved	11
Dampness in walls prevented	2
Walls and ceilings repaired or replastered	29
New sinks provided	12
Wastepipes trapped or repaired	6
Coppers repaired	15
Floors repaired	24

OUTBUILDINGS.**Water Closets:**

Walls repaired and re-pointed	40
Doors repaired or renewed	2
Seats provided	6
Roofs repaired	17
Eaves spouts cleansed, repaired or provided	9
Fallpipes repaired or provided	7
Step repaired	1
Inspection chamber built	1

Coal Stores:

Roofs repaired	17
Wall repaired and re-pointed	1
Erected	7

Ashbin Shelters:

Repaired	2
----------	---

Food Stores:

Repaired	4
----------	---

Total number of houses for which above defects were abated	69
--	----

TABLE 20.

INSPECTION WORK.

Total number of inspections made	.....	.....	.....	38,231
„ „ „ re-inspections made	.....	.....	.....	6,584
„ „ „ defects found	.....	.....	.....	3,643
„ „ „ defects remedied	.....	.....	.....	3,620
„ „ „ informal notices served	.....	.....	.....	897
„ „ „ formal notices served	.....	.....	.....	76
„ „ „ informal notices complied with	.....	.....	.....	852
„ „ „ formal notices complied with	.....	.....	.....	83
„ „ „ letters sent out	.....	.....	.....	2,111
„ „ „ waste water closets attended to	.....	.....	.....	1,675

PAVING OF YARDS.

Three hundred and three houses have been improved by the paving of fifty-three back yards.

The fronts of twenty-four houses in an unadopted street have been improved by the provision of a footpath.

In eight instances, the owners failed to comply with the notices served and the Corporation exercised their powers to pave the yards in default of the owners and recover the expenses incurred.

TABLE 21.

SANITARY ACCOMMODATION.

The following work has been done during the year:—

CLOSET ACCOMMODATION.

No. of waste water closets converted into water closets	.....	13
„ waste water closets abolished	.....	2
„ additional water closets provided	.....	15
„ midden privies converted into water closets	.....	2
„ midden privies converted into pail closets	.....	1
„ midden privies provided	.....	1
„ midden privies abolished	.....	2
„ pail closets provided in lieu of privies	.....	1
„ additional pail closets provided	.....	6
„ trough closets converted into water closets	.....	16

The Closet Accommodation in the Borough at the end of 1933, is:—

Water Carriage System—

Fresh Water Closets	.....	.....	.....	.....	12,101
Waste Water Closets	.....	.....	.....	.....	2,093
					<hr/>
					14,194
					<hr/>

Conservancy System—

Midden Privies	.....	.....	.....	.....	210
Pail Closets	.....	.....	.....	.....	35
					<hr/>
					245
					<hr/>

HOUSE REFUSE ACCOMMODATION.

Ashpits (dry) abolished	.....	.....	.....	.....	28
Ashpits (wet) abolished	.....	.....	.....	.....	2
Ashbins provided in lieu of ashpits	.....	.....	.....	.....	105
Ashbins provided for new houses	.....	.....	.....	.....	199
Ashbins provided for other premises	.....	.....	.....	.....	9

The accommodation for the storage of house refuse is:—

Ashbins	.....	.....	.....	.....	.....	.....	12,704
Ashpits (dry)	.....	.....	.....	.....	.....	.....	1,278
Ashpits (wet)	.....	.....	.....	.....	.....	.....	125

SCAVENGING.

This subject is fully dealt with under the heading of "Public Cleansing."

TABLE 22.

The following Table is that required by the Home Office, and represents the work done by the Sanitary Inspector in connection with Factories, Workshops and Workplaces.

1.—Inspection of:

FACTORIES, WORKSHOPS AND WORKPLACES.

Premises. (1)	Number of		
	Inspection. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
FACTORIES ... (including Factory Laundries)	16	2	-
WORKSHOPS ... (including Workshop Laundries)	213	3	-
WORKPLACES ... (other than Outworkers' Premises)	1	1	-
TOTAL ...	230	6	-

2.—Defects found in Factories, Workshops and Workplaces:

Particulars.	Number of Defects.			No. of Offences in respect to which Prosecutions were Instituted
	Found	Remedied	Referred to H.M. Inspector	
NUISANCES UNDER THE PUBLIC HEALTH ACT—				
Want of Cleanliness ...	12	12	-	-
Want of Ventilation ...	-	-	-	-
Overcrowding ...	-	-	-	-
Want of Drainage of Floors ...	-	-	-	-
Other Nuisances ...	1	1	-	-
SANITARY ACCOMMODATION—				
Insufficient ...	7	4	-	-
Unsuitable or Defective ...	-	2	-	-
Not separate for Sexes ...	-	-	-	-
OFFENCES UNDER THE FACTORY & WORKSHOP ACT—				
Illegal Occupation of Underground Bakehouses ...	-	-	-	-
Other Offences ...	-	-	-	-
TOTAL ...	20	19	-	-

The provision of an intervening ventilated space between the closet and the workroom at one factory, the provision of sufficient closet accommodation for the employees at one factory, and the provision of suitable closet accommodation at another factory, abates three notices that were outstanding at the end of 1932. There is carried over one notice for the provision of a fire escape—there is great difficulty in providing this.

Twelve workshops were found to be dirty; they have been cleansed and limewashed.

Sufficient closet accommodation for the use of the employees has been provided at two factories.

At one workplace the sanitary conveniences were privies. It was found to be possible to drain into a sewer by erecting water closets and a urinal on another part of the site. This provided sufficient closet and urinal accommodation for the employees.

One workshop was discovered not displaying an abstract of the Factory & Workshops Act, and certain necessary notices in connection with the trade. These have been provided.

OUTWORKERS (FACTORY & WORKSHOPS ACT, 1901).

Three notifications have been received from premises where outworkers are employed. The premises were visited and found to conform to the requirements of the Act.

AMUSEMENT HOUSES.

In inspecting Cinemas and the one Theatre, one must again record the impression of the thoughtlessness of the patrons, by the careless way in which cigarette ends, spent matches, cigarette packets, chocolate cartons, and fruit skins, are thrown about, and the careless way in which the sanitary conveniences are used. Each time one visits these places, one finds the need of repairs to the sanitary conveniences. The Management go to a lot of trouble to keep not only the Auditorium, but also the sanitary conveniences, clean. A little thoughtfulness on the part of the general public attending these places would shew an appreciation of the efforts of the Management.

COMMON LODGING HOUSES.

The general depression in trade is reflected in the number of persons who live in common lodging houses. The population is much less than formerly.

During the year, four applications for the transference of keepers were received. These were granted. The Common Lodging Houses are kept in a clean condition.

HOUSES-LET-IN-LODGINGS.

Once again one is to report an increase in this type of dwelling. One finds in the residential parts of the town that a person will take over the tenancy of a house far beyond his or her requirements, place a small amount of furniture in the surplus rooms, and let these off as separate dwellings, the rent charged being extortionate. In other parts of the town, public houses that have become redundant, have been opened out as dwellings, the larger rooms being partitioned off and furnished, and let off as separate dwellings at a high rental. One finds them occupied by the labouring classes.

The difficulty in dealing with this type of dwelling is not local, but national—it is a problem.

TENTS, VANS AND SHEDS.

Special attention has been devoted to these dwellings. One hundred and thirty-six visits have been paid during the year. Your Chief Sanitary Inspector presented reports on the overcrowded conditions and the unsuitableness of the structures. At the close of the year the Sanitary Committee was considering these reports.

CANAL BOATS ACTS, 1877 & 1884.

Probably for the first time no visits of inspection can be recorded. The main traffic on the canal has been in the form of lighters bringing coal from the collieries to the local works the employees of which boats sleep at their homes.

SMOKE ABATEMENT.

The number of recorded observations of the various chimneys in the Borough was eighty-eight.

It is pleasing to note that only on two occasions was the permissible bye-law limit for the emission of black smoke, exceeded. One instance was the chimney in connection with the steam-raising plant at one of our local collieries. As on previous occasions, this was due to the fact that the furnace was simply being used as an Incinerator for getting rid of coal dust recovered from the coal washing plant. The other instance occurred at one of the local works during the time that one of the boilers was undergoing repairs.

Sulphur in the Atmosphere:—The measurement of sulphur dioxide continues to be recorded. The volume in parts per million under what is known as the Volumetric Method is recorded daily at the premises of Messrs. Wood Bros. Works in Doncaster Road. The weight of sulphur dioxide calculated per 100 square centimetres is recorded on cylinders, one of which is exposed in the grounds of the Mount Vernon Sanatorium and the other at Kendray Hospital. All records are sent up to the Department of Scientific and Industrial Research, of which your Committee is a contributing authority.

Though still in its experimental stage, the information gained from the work done in Barnsley and other towns, is of great assistance to the investigators attached to the Department of Scientific and Industrial Research.

The average for the year in parts per million was 0.137; the average weight in grammes per 100 square centimetres of exposed fabric was, at Kendray Hospital, 0.0957, and at Mount Vernon, 0.0678.

Your Chief Sanitary Inspector continues to serve as your Representative on The West Riding of Yorkshire Regional Smoke Abatement Executive Committee, and also on the Standing Conference of the Department of Scientific & Industrial Research.

OFFENSIVE TRADES.

During the year four applications were received to establish the trade of fish frier. Two applications were granted and the other two refused.

Change of tenancy occurred at twelve premises used for fish frying; the licences were transferred to the new occupiers.

The sanitary condition of four premises was improved.

Three fish frying premises have been discontinued.

A change took place in the tenancy of the premises used by a rag and bone dealer. The licence was transferred.

Licences for all tripe boiling, gut-scraping, and knackers' yard, were renewed.

HOUSING.

Three thousand, seven hundred and eleven dwelling-houses were inspected under the Public Health Acts. Under the Housing Act, 1930, twenty-seven dwelling-houses were inspected and particulars recorded.

Defects were found in three thousand, three hundred and twenty-five houses inspected under the Public Health Acts and notices were served upon the owners to remedy the defects.

None of the houses inspected under the Housing Act were found to be free from sanitary defects. Eight houses were found to be totally unfit for human habitation.

In the report for the year 1932 a statement is made on page 64 that "the many defects in a number of houses are engaging the attention of the Sanitary Committee." The houses referred to are those known as Nos. 5, 7, 9, 11, 13, 15, 17, and 19 Armin Street, 2, 4, 6, 8, 10, 12, 14 and 16 Dove Row, and 19, 20, 21 and 22 Dove Row, Hoyle Mill. After serious consideration and after meeting the owners, the Sanitary Committee came to the conclusion that sixteen of the dwelling-houses, namely 5 to 19 Armin Street and 2 to 16 Dove Row were unfit for human habitation and incapable of being made fit at a reasonable expense, and placed Demolition Orders upon the houses. The Committee accepted an undertaking from the owners to carry out repairs at Nos. 19 to 22 Dove Row.

The owners of Nos. 5 to 19 Armin Street appealed against the Demolition Orders. The case was heard before his Honour Judge Frankland, Barnsley County Court. The Judge dismissed the Appeal and confirmed the Demolition Orders.

Demolition Orders were also made for the following houses:—

The Cottage at the rear of 43 Sheffield Road.

Eaming Wood Cottage, Eaming Wood.

The owner of the three dwelling-houses numbered 7, 9, 11, Ct. 8, Wilson Street voluntarily demolished the three houses. They were vacant and unfit for human habitation.

The Order to demolish Eaming Wood Cottage has been complied with.

Parts of four houses let as tenements, have been closed as unfit for human habitation. These are 76a New Street, 41 Gawber Road, and 1 Back Moss Square, Worsboro' Common. The first three are underground rooms. The Sanitary Committee made Closing Orders for 76a New Street and 1 Back Moss Square. The tenant of No. 41 Gawber Road had, unknown to the owners, sub-let two underground rooms. When communicated with the owners immediately took steps to have the two rooms vacated and prohibit them being let as separate dwellings. In this they succeeded and it was not necessary for the Council to place closing Orders on these two rooms.

All Closing Orders and Demolition Orders were confirmed by the Council.

Clearance Orders were made for the three Clearance Areas:

- (a) New Street (Eastern) Area.
- (b) Oakwell Yard.
- (c) Drake's Yard.

Under the Public Health Acts, defects have been remedied in two thousand, nine hundred and two houses. Sixty-nine houses have been rendered fit under the Housing Acts.

One hundred and ninety-nine new houses have been erected during the year.

I am indebted to Mr. Taylor, Borough Engineer, for the following information:—

The number of houses erected during the year was one hundred and eighty-nine by private enterprise, and ten by the Corporation under their Housing Schemes.

There are one hundred and thirty-five houses now in course of erection by private enterprise.

Since the coming into operation of the Housing Act, 1919, a total of three thousand, five hundred and thirty-one houses have been erected in the Borough; of these, the contribution of the Corporation amounts to two thousand, six hundred and forty-three, and those erected by private enterprise to eight hundred and eighty-eight.

INSPECTION AND SUPERVISION OF FOOD.

ICE-CREAM.

The regulation of the manufacture and sale of ice-cream is governed under the Barnsley Corporation Act, 1914, Section 13. This Section is very useful. It is a strange thing that in times of trade depression, manufacturers and vendors of ice-cream increase, why, one cannot say, unless it be that they hope to augment their income. Yet I suppose that this confection is really a luxury rather than a necessity.

Seventy-eight visits were paid to premises used by manufacturers of ice-cream. Fourteen premises were cleansed; three were discontinued as unsuitable.

MILK SUPPLY.

Three hundred and thirteen visits of inspection to the farms and dairies in the Borough were made during the year.

If reference is made to Table 18 the improvements that have been made in the cowsheds and dairies are there recorded.

It was necessary to take action against one farmer, who failed, after repeated warnings, to wash the flanks and udders of his cows prior to milking, failing to keep his cowsheds clean, failing to keep the approach to his cowsheds in a clean condition and failing to provide sufficient artificial light. One of the employees was also dealt with for wearing dirty clothing during milking operations. The charge against the employee was dismissed, but the farmer was fined £10 (ten pounds) including costs, for the four offences mentioned.

Five applications were received for registration as producers of milk. These were granted, the producers and their premises being registered.

Seven applications were received for registration as retail purveyors of milk. These were acceded to.

Five samples of Grade 'A' Milk and seven samples of Pasteurised Milk were submitted for bacteriological examination. One sample of Grade 'A' Milk and one sample of Pasteurised Milk did not conform to the standards laid down in The Milk (Special Designations) Order, 1923, both samples having a bacterial count above those specified in the Order.

Six samples of ordinary milk were examined for bacterial content; five were found to be satisfactory. One sample taken from a producer whose premises are outside the Borough, was very unsatisfactory, the sample having a high bacterial count; B.Coli was also present in the milk.

Examination for the Presence of B.Tubercle: Seven samples of Pasteurised Milk and five samples of Grade 'A' Milk were examined with a negative result in each case.

One hundred and four samples of ordinary milk were examined and in four samples tubercle bacilli were found. This led to the discovery of two cows that were giving T.B. Milk. The animals were slaughtered.

To assist your Veterinary Surgeon in a clinical examination, one sample of sputum from a cow was examined and found to contain the bacillus. This animal was slaughtered.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

An application was received for a licence to sell Certified Milk. This was granted.

The supplementary licence to sell Grade 'A' Milk and the licence to pasteurise milk were renewed.

TUBERCULOSIS ORDER, 1925.

In addition to the two animals discovered to be giving T.B. Milk, six others were discovered to be tubercular by clinical examination. These eight animals were slaughtered and £52 7s. 6d. (fifty-two pounds, seven shillings and sixpence) paid as compensation.

FOOD INSPECTIONS.

MEAT.

The number of animals slaughtered in the Borough during 1933, was:—

Animals.	Public Abattoir	Private Slaughterhouses	Total
Cattle	1,904	3,001	4,905
Sheep	4,809	7,425	12,234
Calves	547	913	1,460
Pigs	1,985	8,450	10,435
	<hr/> 9,245	<hr/> 19,789	<hr/> 29,034

The number of animals slaughtered at the Public Abattoir continues to increase.

The number of visits to private slaughterhouses was 2,672.

The owner of one registered slaughterhouse has closed his slaughterhouse. The number of slaughterhouses now on the register is thirteen, a decrease of one during the year.

Sixty-two thousand, five hundred and eighty-nine pounds of fresh meat, and two thousand and twenty pounds of imported meat were condemned as unfit for human consumption.

There is an increase of sixteen thousand, eight hundred and seventy-two pounds of fresh meat as compared with the amount condemned in 1932. The number of animals affected with Tuberculosis shews an increase. One must record the opinion that farmers who suspect that cows in their herds are affected with Tuberculosis are not notifying these animals to the local authority; they sell them to dealers. The dealers failing to sell them in one market, transfer them to another; until they are sold and find their way into a slaughterhouse. On examination of the carcase, the condition of the udders and carcase leaves no doubt in the minds of your inspectors that the persons milking the cows could not have failed to notice the abnormal conditions in the udders. Every effort is made to trace the history of the cows and find the farm from which they came, but very rarely are our efforts successful. The farmer could receive compensation under the Tuberculosis Order, but, under present legislation, no compensation is payable to the butcher.

There have been no prosecutions during the year. On one occasion, one butcher at the abattoir refused to surrender a quantity of meat shewing signs of disease. Your Chief Sanitary Inspector seized it. It was condemned on a Magistrate's Order. The Sanitary Committee sent, through the Town Clerk, a strong letter of warning to the offender.

The following three Tables give the number of animals and organs condemned during the year, as unfit for human consumption, together with the diseases met with:—

TABLE 23.

Carcases with all Organs condemned as totally Unfit
for Human Consumption.

	Tuber- culosis.	Accident	Inflmty. Diseases.	Parasitic Diseases	Other Diseases.
Cows	21	1*	1	-	2†
Heifers	2	-	-	-	-
Bullocks	1	-	-	-	-
Sheep	-	2z	1	1	-
Pigs	7	3o	2‡	-	6§
Calves	-	-	-	-	2x

* Extensive bruising, with gangrene.

† In one instance Pyæmia with dropsy and emaciation; in the other, septic metritis.

z Moribund.

o One case Moribund; one case drowned; one case suffocated.

‡ One case nephritis and dropsy; in the other case, peritonitis.

§ Three cases Pyæmia; two cases swine erysipelas; one case swine fever.

x One case umbilical pyæmia and joint ill.

TABLE 24.

Carcases partially condemned as Unfit
for Human Consumption.

	Tuber- culosis.	Accident	Inflmty. Diseases.	Parasitic Diseases	Other Diseases.
Cows	10	1	-	-	-
Heifers	2	-	-	-	-
Pigs	3	-	-	-	2

TABLE 25.

Various Organs condemned as Unfit for Human Consumption.

		Heads	Tongues	Lungs	Livers	Stomachs	Kidneys	Hearts	Spleens	Udders	Mesenteries	Intestines	Uteri
TUBERCULOSIS--													
Cows	...	51	51	573	58	14	21	7	17	7	87	75	5
Heifers	...	10	10	25	1	2	-	2	2	-	3	2	-
Bullocks	...	9	7	33	6	2	-	2	3	-	5	5	-
Bulls	...	5	5	19	2	-	2	-	-	-	2	2	-
Calves	...	-	-	1	-	-	-	-	-	-	-	-	-
Pigs	...	342	342	221	162	64	-	136	56	1	147	117	-
INFLAMMATORY DISEASES —													
Cows	...	-	-	4	22	-	18	1	1	78	-	-	-
Heifers	...	-	-	3	-	-	-	1	-	-	-	-	-
Bullocks	...	-	-	7	3	-	2	1	-	-	-	-	-
Bulls	...	-	-	2	2	-	1	-	-	-	-	-	-
Calves	...	-	-	1	-	-	-	-	-	-	-	-	-
Sheep	...	-	-	3	13	-	-	2	-	-	-	-	-
Pigs	...	-	-	204	35	4	17	20	4	-	3	4	1
PARASITIC DISEASES —													
Cows	...	-	-	25	23	-	-	-	-	-	-	-	-
Heifers	...	-	-	5	10	-	-	-	-	-	-	-	-
Bullocks	...	-	-	71	50	-	-	-	-	-	-	-	-
Bulls	...	-	-	-	2	-	-	-	-	-	-	-	-
Sheep	...	-	-	45	120	-	-	-	-	-	-	-	-
Pigs	...	-	-	5	1	-	-	-	-	-	-	-	-
OTHER BACTERIAL DISEASES —													
Cows	...	3	3	50	11	-	2	-	1	-	3	4	1
Heifers	...	-	1	5	3	-	-	-	-	-	-	-	-
Bulls	...	-	-	6	5	-	-	-	-	-	2	1	-
Bullocks	...	-	1	20	7	1	-	-	1	-	-	1	-
Calves	...	-	-	1	-	-	-	-	-	-	-	-	-
Sheep	...	-	-	16	3	-	-	-	-	-	-	-	-
Pigs	...	3	3	14	12	3	-	8	5	-	1	1	-

IMPORTED MEAT.

There has been two thousand and twenty pounds of imported meat condemned.

FISH.

During the year ninety-one pounds of Fish Fillets and seven hundred and seventy-two pounds of mussels were condemned as unsound.

RABBITS AND POULTRY.

Eighteen Rabbits weighing forty pounds were condemned as unsound. There were no condemnations of Poultry.

FRUIT AND VEGETABLES.

Thirty-two pounds of Grapes; sixty-five pounds of Oranges; three pounds of Tomatoes and four hundred and sixty-two pounds of Beans, were condemned during the year.

PRESERVED FOODS.

The following preserved foods were destroyed as unfit for human consumption:—

Meat	.....	.....	13 tins weighing	$25\frac{1}{4}$ pounds
Fish	.....	.....	21 " "	$7\frac{1}{2}$ "
Fruit and Vegetables.....	59	" "	49	" "
Milk	38 " "	25 "
			<hr/>	<hr/>
			131 " "	$106\frac{3}{4}$ "
			<hr/>	<hr/>

OTHER FOODS.

There has also been condemned:—

Duck Eggs	38 pounds
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TABLE 26.

SUMMARY OF FOOD DESTROYED DURING 1933.

				lbs.
English Meat from Slaughterhouses	61,356
English Meat from Cold Stores and Shops	.....	.....	.....	1,234
Imported Meat	.....	.....	.....	2,020
Fish	.....	.....	.....	863
Rabbits	.....	.....	.....	40
Fruit and Vegetables	.....	.....	.....	562
Preserved Foods	.....	.....	.....	$106\frac{3}{4}$
Other Foods	.....	.....	.....	38
				<hr/>
				$66,219\frac{3}{4}$
				<hr/>

29 tons, 11 cwts., 1 st., $13\frac{3}{4}$ -lbs.

TABLE 27.

ADULTERATION.

For the purposes of the Food and Drugs (Adulteration) Act, 1928, one hundred and sixty-seven samples were taken for analysis. The following Tables give details:—

**SAMPLES OF MILK AND CREAM SENT TO THE
BOROUGH ANALYST FOR EXAMINATION, 1933.**

Article.	Genu- ine.	Adulter- ated.	Total.	Taken Formally.		Taken Informally.	
				Gen.	Adultrd	Gen.	Adultrd
Milk ...	98	10	108	96	10	2	...
Cream ...	4	...	4	...	...	4	...
TOTALS...	102	10	112	96	10	6	...
				106		6	

The Standard for Milk (other than skimmed, separated or condensed milk) as laid down in the Sale of Milk Regulations, 1901, is Milk-fat 3.0 per cent, non-fatty solids 8.5 per cent.

The average composition of the 108 samples of milk taken during the year, is:—

Milk-fat	.....	.....	3.56 per cent.
Non-fatty Solids	.....	.....	8.80 per cent.
Total Solids	.....	.....	12.36 per cent.

The average composition of the 98 genuine samples of milk, is:—

Milk-fat	.....	.....	3.64 per cent.
Non-fatty Solids	.....	.....	8.90 per cent.
Total Solids	.....	.....	12.54 per cent.

ARTICLE.	Gen. uine	Adul- ter- ated	Total	T'ken formally		T'k'n infrmly	
				Gen- uine	Adul- t'rated	Gen- uine	t'rat'd

ARTICLE.	Genuine	Adulterated	Total	Taken formally		Taken informally	
				Genuine	Adulterated	Genuine	Adulterated
Skimmed Milk	1	.....	1	.....	.....	1	.....
Dried Milk	1	.....	1	.....	.....	1	.....
Condensed Milk	3	.....	3	.....	.....	3	.....
Tea	2	.....	2	.....	.....	2	.....
Coffee	1	.....	1	.....	.....	1	.....
Mustard	2	.....	2	.....	.....	2	.....
Flox Filling	1	.....	1	.....	.....	1	.....
Eggelov	1	.....	1	.....	.....	1	.....
Egg Powder	.....	1	1	.....	.....	.....	1
Brawn	1	.....	1	.....	.....	1	.....
Potted Beef	1	.....	1	.....	.....	1	.....
Red Cherries (tinned)	1	.....	1	.....	.....	1	.....
Corn Flour	1	.....	1	.....	.....	1	.....
Sausage	4	.....	4	.....	.....	4	.....
Bloater Paste	1	.....	1	.....	.....	1	.....
Fig Conserve	1	.....	1	.....	.....	1	.....
Oranges	1	.....	1	.....	.....	1	.....
Pickles	1	.....	1	.....	.....	1	.....
Bacon	2	.....	2	.....	.....	2	.....
Margarine	3	.....	3	.....	.....	3	.....
Butter	3	.....	3	.....	.....	3	.....
Lard	2	.....	2	.....	.....	2	.....
Peas	2	.....	2	.....	.....	2	.....
Potted Meat	2	1	3	.....	.....	2	1
Pepper	1	.....	1	.....	.....	1	.....
Jam	1	.....	1	.....	.....	1	.....
Lemon Curd	2	.....	2	.....	.....	2	.....
Coffee and Chicory	1	.....	1	.....	.....	1	.....
Ham and Tongue Paste	1	.....	1	.....	.....	1	.....
Cheese	1	.....	1	.....	.....	1	.....
Cocoa	1	.....	1	.....	.....	1	.....
Oatmeal	1	.....	1	.....	.....	1	.....
Cream of Tartar	1	.....	1	.....	.....	1	.....
Beef Broth	1	.....	1	.....	.....	1	.....
Mincemeat	1	.....	1	.....	.....	1	.....
Olive Oil	1	.....	1	.....	.....	1	.....
Paregoric Elixir	1	.....	1	.....	.....	1	.....
Sweet Spirit of Nitre	1	.....	1	.....	.....	1	.....
TOTALS	53	2	55	.....	.....	53	2

55

TABLE 29.
PARTICULARS OF ADULTERATION.

No. of Sample	Article	Adulteration or Offence	Fines	Remarks
1264	New Milk	Deficient in Milk Fat 24·3%	1 Defendant £5 & costs; 1 Defendant costs	
1316	„	Deficient in Milk Fat 12·3%	20/- and costs	
526 WRCC	„	Slightly deficient in Milk Fat		
1331	Potted Meat	Contained 77% Moisture		Warned by Letter
1350	New Milk	Slightly deficient in Milk Fat		Warned by Letter
1369	„	Slightly deficient in Solids Not-Fat ...		Warned by Letter
1379	„	Slightly deficient in Solids Not-Fat ...		
1405	„	Slightly deficient in Milk Fat		
1412	„	Deficient in Milk Fat 5%	}	These samples are fully explained in the notes following this Table
1422	„	Deficient in Milk Fat 16·6%		
1423	„	Deficient in Milk Fat 21·0%		
1287	Egg Powder	Incorrectly described as Egg Powder as the sample consisted of Rice & Maize Flour, Bicarbonate of Soda & Cream of Tartar. Coloured yellow with Turmeric.		

Proceedings were instituted for samples of milk Nos. 1264 and 1316. There were two defendants in the case for Sample No. 1264; one defendant was fined £5 and costs, the other defendant had to pay costs. The defendant in the case for Sample No. 1316 was fined 20/- and costs.

Sample No. 526 W.R.C.C. is an "appeal to the cow" sample taken by the West Riding County Council in connection with Sample No. 1316.

Samples of milk Nos. 1350 and 1405 are slightly deficient in milk-fat and Samples Nos. 1369 and 1379 are slightly deficient in solids-not-fat. The deficiency was not sufficient to warrant proceedings being taken and the Council instructed the Town Clerk to send letters of warning in each case.

Samples of milk Nos. 1412, 1422 and 1423 require an explanation. When the Analyst's Report was received on Sample No. 1412, a following-up Sample No. 1422 was taken. At the time the farmer was greatly troubled. He had, two days prior to the taking of Sample No. 1412, introduced "spent brewer's grain" into the animals diet. The effect of the "grains" on the animals was an internal upset, with profuse diarrhoea. An "appeal to the cows" sample was taken, numbered 1423; this sample was deficient in milk-fat to the extent of 21.0%. No proceedings were taken. The farmer altered the diet of the animals. An Inspector from the Sanitary Department made frequent visits to the farm, and assisted the farmer in taking a number of samples of milk which were submitted by the farmer to an analyst; the Department was shewn copies of all the analyst's certificates; after about ten days the composition of the milk became normal.

A sample of Potted Meat, No. 1331, was, in the opinion of the Public Analyst, adulterated by reason of the presence of 77% moisture. There is no legal standard for Potted Meat and the Council decided to warn the vendor by letter.

A sample of Egg Powder, No. 1287, was incorrectly described by the Sampling Officer as "Egg Powder." This was a clerical error. It was correctly described on the label on the packet as "Egg Substitute Powder."

PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923 and 1927.

Three samples of Condensed Milk were reported by the Public Analyst to comply with the regulations.

PUBLIC HEALTH (DRIED MILK) REGULATIONS, 1923 and 1927.

One sample of Full Cream Dried Milk conformed to the regulations.

PUBLIC HEALTH (PRESERVATIVES IN FOOD) REGULATIONS, 1925 and 1927.

There were no contraventions of these regulations.

ARTIFICIAL CREAM ACT, 1929.

There have been no applications for registration of premises to manufacture or sell artificial cream.

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOOD.

Mr. John Evans, F.I.C., Sheffield, continues his appointment as Public Analyst.

Bacteriological examinations are carried out at the laboratories of the West Riding County Council, Wakefield.

AGRICULTURAL PRODUCE (GRADING and MARKING) ACT, 1928, and MERCHANDISE MARKS ACT, 1926.

There are no contraventions to report under the above Acts.

RAT REPRESSION—RATS & MICE (DESTRUCTION) ACT, 1919.

Five hundred and thirty-four visits were paid to premises infested with rats and mice. Thirty-five premises were freed from rats; six premises were made rat-proof. One thousand, eight hundred and seventy-five baits were laid; forty-five rats were caught in traps.

DISINFECTION AND DISINFESTATION.

Two thousand, five hundred and sixty-eight articles of clothing or bedding have been passed through the steam disinfecter.

The following have been disinfected by spraying:—

- 1,745 rooms in 529 dwelling-houses.
- 1 room in 1 school.
- 38 hospital wards.
- 1 room in Nurses' Home.
- 2 rooms at Venereal Diseases Centre.
- 3 rooms at Public Library.

Thirty-seven dwelling-houses have been freed from bugs by treatment with a special fluid used in the form of a spray. One house was treated by gas generated from specially made blocks. Sixty-five visits have been made for this purpose.

The Council exercised the powers conferred upon them by Section 46 of the Public Health Act, 1925, and served written notices on the occupiers of four dwelling-houses certified by your Chief Sanitary Inspector as being infested with vermin, requiring them to cleanse the premises.

RAG FLOCK ACTS, 1911 and 1928.

There are no premises within the Borough where Rag Flock is manufactured, and so far as is known, none where Rag Flock is used or sold.

TABLE 30.

HOUSING RETURN—(Ministry of Health)—1933.

1.—Inspection of dwelling-houses during the year:

(1) (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	3,736
(b)	Number of inspections made for the purpose	9,507
(2) (a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	25

(b) Number of inspections made for the purpose	711
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	8
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	3,319
2.—Remedy of defects during the year without service of formal notices:	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	1,831
3.—Action under Statutory Powers during the year:	
(a) Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930:—	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a) By Owners	29
(b) By Local Authority in default of Owners	Nil
(b) Proceedings under Public Health Acts:—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	119
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a) By Owners	137

(b) By Local Authority in default of Owners	Nil
(c) Proceedings under Sections 19 and 21 of the Housing Act, 1930:—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	18
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	1
(d) Proceedings under Section 20 of the Housing Act, 1930:—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	2
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were deter- mined, the tenement or room having been rendered fit	Nil
(e) Proceedings under Section 3 of the Housing Act, 1925:—	
(1) Number of dwelling-houses in respect of which notices became operative requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a) By Owners	Nil
(b) By Local Authority in default of Owners	Nil
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close	Nil

(f) Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925:—

(1) Number of dwelling-houses in respect of which Closing Orders became operative	Nil
(2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	Nil
(3) Number of dwelling-houses in respect of which Demolition Orders became operative	Nil
(4) Number of dwelling-houses demolished in pursuance of Demolition Orders.....	Nil

NOTE:—Section 3 and Sections 11 to 15 of the Housing Act, 1925, have been repealed by the Housing Act, 1930, but the proviso to Section 64 of the Act of 1930 continues in force any Notices, Closing Orders and Demolition Orders made before the operation of the Act (15th August, 1930), and houses subject to those Notices and Orders must continue to be dealt with under the relative provisions of the Act of 1925.

PUBLIC CLEANSING 1933-34.

This portion of the report covers the period of the financial year commencing 1st April, 1933, and finishing 31st March, 1934.

COLLECTION OF HOUSE AND TRADE REFUSE.

The total cost of collection including loan charges and depreciation shews an increase of £534 11s. 0d. The increase is due to the cost of complete overhaul of three vehicles. The whole of the expense is charged against the year's collection cost and not spread out over a period of years. Four vehicles have been fitted with a complete set of tyres. The cost is included in the year's expense. An increase in the road fund licences must also be taken into account. A full twelve months' depreciation of one vehicle purchased out of revenue is also included.

DISPOSAL OF HOUSE AND TRADE REFUSE.

Controlled Tipping continues to be the main method of disposal. Seven tips have been in use during the year; these are:—

- (a) The Barnsley British Co-operative Society's Employees' Sports Ground, Grove Street.
- (b) Field adjoining the old reservoir, Smithies.
- (c) Playing Fields, Holgate Grammar School.
- (d) Playing Fields, Wilthorpe Park.
- (e) Playing Fields, Littleworth School.
- (f) Queen's Ground.
- (g) Playing Fields, Raley Schools.

The second playing field at the Holgate Grammar School has been completed. The playing field at Wilthorpe Park has also been completed. The whole of the refuse has been covered with soil, and grass seed has been sown. For the latter part of this work a number of unemployed men were engaged. The increased expense of £153 for disposal costs is the wages paid to these men. Nobody will begrudge this; the opportunity of providing employment in these days is ample recompense.

COLLECTION AND DISPOSAL COSTS.

The nett cost of collection shews an increase of £463 over the previous twelve months and the nett cost of disposal is increased by £203. These increases are explained in preceding paragraphs of the report.

The Tables printed below give details of the work done and the cost:—

TABLE 31.

	£	s.	d.
Total Cost of Collection (including Loan Charges)	10,520	19	2
Total Cost of Disposal (including Loan Charges)	4,450	2	5
Total Gross Cost of Collection and Disposal	£14,971	1	7

INCOME:	£	s.	d.	£	s.	d.
Sale of Materials Recovered	159	2	3			
Departmental Team Labour	355	2	4			
Collection of Trade Refuse	233	15	4			
Disposal of Trade Refuse	30	7	3			
Loan of Railway Wagons	20	7	3			
Rents from Properties	162	12	11			
Sale of Manure	18	10	0			
Miscellaneous	18	12	11			
				£998	10	3

Nett Cost of Collection (including Loan Charges)	9,884	14	9
Nett Cost of Disposal (including Loan Charges)	4,087	16	7
Total Nett Cost of Collection and Disposal	£13,972	11	4

COLLECTION OF REFUSE.

Receptacles:

Total number of	Pail Closets emptied	.....	.....	2,403	
”	”	”	Wet Ashpits emptied	.....	1,777
”	”	”	Dry Ashpits emptied	.....	18,121
”	”	”	Ashbins emptied	.....	776,426
”	”	”	Cesspools emptied	.....	17
”	”	”	Garbage Tubs emptied	.....	211

Weight of Refuse (estimated):

Weight of Refuse (estimated):						T.	C.	Q.
Total number of tons from Wet Ashpits and Pails						1,265	9	0
"	"	"	"	"	Dry Ashpits	7,047	17	0
"	"	"	"	"	Ashbins	21,687	9	0
"	"	"	"	"	Trade Refuse	375	1	0
"	"	"	"	"	Garbage Tubs	28	7	0
"	"	"	"	"	Waste Paper	28	16	0
"	"	"	"	"	Market Refuse	723	0	0
"	"	"	"	"	Street Sweepings	4,232	9	0

TABLE 32.
DISPOSAL OF REFUSE (IN TONS)

Place of Disposal.	House Refuse.			Trade Refuse.			Market Refuse.	Street Sweepings and Dust.	Refuse Delivered by Tradesmen and others.	Total.
	Night Sol.	Dry Ashes.	Bins.	Garbage.	Bins.	Paper.				
Refuse Disposal Works—										
Pogmoor ...	...	7	10	...	56	29	3	...	62	167
Controlled Tipping—										
Co-op. Sports Tip	...	1,667	249	...	154	...	114	293	16	2,493
Smithies Tip	484	280	2,866	...	...	...	78	168	4	3,880
Shaw Lane Tip	66	1,202	1,551	...	3	...	...	144	...	2,966
Wilthorpe Park Tip	70	839	5,394	...	4	...	154	526	668	7,655
Littleworth Tip	596	467	7,200	...	...	...	...	344	6	8,613
Queen's Ground Tip	26	2,057	2,903	...	158	...	355	665	60	6,224
Raley School Tip	12	529	1,514	...	...	...	19	140	125	2,339
Total by Controlled Tipping	1,254	7,041	21,677	...	319	...	720	2,280	879	34,170
Farmers, Gardeners, etc. ...	...	...	...	...	...	...	...	2,563	...	2,563
Local Farms ...	11	..	...	28	...	...	...	...	...	39
TOTAL. TONS ...	1,265	7,048	21,687	28	375	29	723	4,843	941	36,939

TABLE 33.
REFUSE COLLECTION AND DISPOSAL.

PARTICULARS.	COLLECTION.		DISPOSAL.		TOTAL.	
	Including Depreciation or Loan Charges.	Excluding Depreciation or Loan Charges.	Including Depreciation or Loan Charges.	Excluding Depreciation or Loan Charges.	Including Depreciation or Loan Charges.	Excluding Depreciation or Loan Charges.
REVENUE ACCOUNT.						
Gross Expenditure ...	£ s. d. 10,520 19 2	£ s. d. 9,697 19 2	£ s. d. 4,450 2 5	£ s. d. 3,257 2 5	£ s. d. 14,971 1 7	£ s. d. 12,955 1 7
Gross Income ...	636 4 5	636 4 5	362 5 10	362 5 10	998 10 3	998 10 3
Nett Cost	9,884 14 9	9,061 14 9	4,087 16 7	2,894 16 7	13,972 11 4	11,956 11 4
UNIT COSTS.						
Gross Expenditure (per ton) ..	0 6 9.36	0 6 2.71	0 2 10.28	0 2 1.09	0 9 7.64	0 8 3.80
Gross Income (per ton) ...	0 0 4.93	0 0 4.93	0 0 2.79	0 0 2.79	0 0 7.72	0 0 7.72
Nett Cost (per ton) ..	0 6 4.43	0 5 9.78	0 2 7.49	0 1 10.30	0 8 11.92	0 7 8.08
Nett Cost per 1,000 Population ...	139 9 0	126 11 2	57 1 10	40 8 7	196 10 10	166 19 9
Nett Cost per 1,000 Houses or Premises from which refuse is collected	564 16 10	517 18 6	233 11 9	165 8 10	798 8 7	683 7 4
RATE POUNDAGE.						
Nett Cost : equivalent Rate in the £	0 0 8.79	0 0 8.06	0 0 3.63	0 0 2.57	0 1 0.42	0 0 10.63
Percentage of above to total Rates in £	4.96%	4.55%	2.05%	1.45%	7.01%	6.0%

Total Refuse Collected 31,155 tons
Weight in cwts. per 1,000 population per day..... 24.18 cwts.
(365 days to the year).
Population—Midsummer, 1933 71,600
Number of Houses and Shop Premises 17,515

Rateable Value £339,430
Product of a Penny Rate £1,124
Total Rates in the £ 14/9

STREET SCAVENGING.

The year 1932-1933 will be remembered for the heavy snowfall and floods; the twelve months under review for a drought and water shortage. The shortage of water and decreased rainfall seriously affects street scavenging. The misuse of street gullies, which are commonly used as a place for disposing of foul liquids, is always a matter of grave concern. The liquids gives off offensive odours. Rain dilutes the liquid and assists in keeping the gully contents fairly sweet. The absence of rain, the shortage of water and the evaporation of the liquid in the street gullies was very noticeable during the hot summer weather.

Arrangements with the owners of private wells for a supply of water to enable the gullies to be flushed, was greatly appreciated. Thanks are due to the owners for a gratuitous supply of water.

The plant for street scavenging was augmented by the purchase of two mechanical snow ploughs. They were purchased out of revenue.

TABLE 34.
STREET SCAVENGING.

PARTICULARS.	STREET SWEEPING AND WATERING.		GULLEY CLEANSING.		SNOW REMOVAL.	
	Including Depreciation or Loan Charges.	Excluding Depreciation or Loan Charges.	Including Depreciation or Loan Charges.	Excluding Depreciation or Loan Charges.	Including Depreciation or Loan Charges.	Excluding Depreciation or Loan Charges.
REVENUE ACCOUNT—	£	s. d.	£	s. d.	£	s. d.
Gross Expenditure ...	5,116	2 5	5,116	2 5	130	6 6
Gross Income ...	199	15 11	199	15 11	...	...
Nett Cost ...	4,916	6 6	4,916	6 6	130	6 6
UNIT COSTS—						
Nett Cost per 10,000 sq. yards cleansed...	6sh.		...		...	...
Nett Cost per 1,000 Gullies cleansed ...	...		£6·28		...	...
Nett Cost per 1,000 Population ...	£68·65		£16·35		£1·82	£1·82
RATE POUNDAGE—						
Nett Cost—equivalent rate in the £ ...	4·37d.		1·04d.		1·04d.	115d.

Sq. yards of Streets cleansed (exclusive of footpaths)	163,820,800	Approx. mileage cleansed 3 times weekly	...	6
Total number of gullies cleansed	...	"	2	16
Total mileage of streets cleansed	...	"	once weekly	44
Approx. mileage cleansed daily	...	"	less than once weekly	2

PUBLIC CONVENIENCES.

At the present time the number of Public Conveniences under the control of the Sanitary Committee, is twenty. Nineteen of these are Public Urinals, situated in various parts of the Borough, their distribution being as follows:—

1. Churchfield.
2. Summer Lane.
3. Wheatsheaf Hotel.
4. Shaw Inn, Racecommon Road.
5. Park Road, adjoining Park.
6. Park Road, Clarkson's Brewery.
7. Pontefract Road (nr. Mt. Osborne).
8. Oakwell Lane, near Railway Bridge.
9. Junction of Mt. Vernon & Upper Sheffield Roads.
10. Cemetery Road, Coach & Horses.
11. Cemetery Road, Junction.
12. Ardsley Depot.
13. Hoyle Mill.
14. Monk Bretton (near Colliery).
15. Monk Bretton (Klondyke).
16. Monk Bretton (Westgate).
17. Tollgate Inn.
18. Eldon Street North.
19. Pontefract Road, Cundy Cross.

The only conveniences for females are in Peel Square. These, together with those for the males, are underground. Closet accommodation is provided in both conveniences.

The public urinals at the junction of Sheffield and Doncaster Roads and the junction of New and Princess Streets, have been demolished. A new urinal has been erected in Pontefract Road, Cundy Cross.

There are other conveniences in the market place for the use of both sexes, but these are under the control of the Markets Committee.

During the year, the Committee discussed the provision of free lavatory accommodation for females at Peel Square Conveniences. Free use was given to the whole of the closets as an experiment.

FARMING.

Particulars of land under cultivation and cropped, are:—

Huddersfield Road Fields:

Ten acres were given up to Oats.

Four and a quarter acres were given up to Potatoes.

Nine and a half acres were given up to Hay.

One acre was given up to Tares.

Lund Wood:

One acre was given up to Turnips.

One quarter of an acre was given up to Tares.

One acre was given up to Hay.

Hay was also obtained from the Grammar School Fields, Ardsley Cemetery and the Open Air School.

The total crops were:—

Forty-four and a half quarters of Oats.

Seven tons of Oat-Straw.

Twenty-two tons of Hay.

Twenty-one tons of Potatoes.

Six tons of Tares.

Three tons of Swedes.

The total value of the Crops was £221

(Two hundred and twenty-one pounds)

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

PUBLIC HEALTH SERVICES COMMITTEE.

Chairman:—Alderman E. Sheerien.

Vice-Chairman:—Councillor J. G. E. Rideal.

His Worship the Mayor:—Councillor J. Guest, J.P.

Alderman S. Trueman	Councillor H. Snowden
„ J. Walton	Mrs. Allum
Mrs. Councillor Dennis	„ Feeley
„ Soper	„ Henry
Councillor A. Allen	„ Rideal
„ D. Allott	„ Ruckledge
„ T. W. Beevers	„ Snowden
„ T. Lang	Mr. G. A. Rawlings
„ T. W. Richardson	Mr. G. Winterbottom.

HOSPITALS COMMITTEE.

Chairman:—Alderman J. Walton.

Vice-Chairman:—Councillor J. T. Mitchell.

His Worship the Mayor:—Councillor J. Guest, J.P.

Alderman R. J. Soper	Councillor H. Burgin
„ S. Trueman	„ A. Dunk
Mrs. Councillor Dennis	„ H. Jackson
„ Soper	„ A. Jepson
Councillor A. Allen	„ W. J. Taylor
„ D. Allott	Mr. G. Hamby
„ T. W. Beevers	Mr. N. Mell

BARNSELEY COUNTY BOROUGH COUNCIL. STATISTICS 1900—1933. TABLE 35.

Year	Population	Inhabited Houses	Average Size of Family (Census)	Birth Rate	Death Rate	Infant Mortality Rate	Pulmonary Tb. Death Rate	Respiratory (Bron- chitis & Pneumonia) Death Rate
1900	40,500	..	..	33.20	21.43	182	..	..
1901	41,083 (Census)	8,563	4.79	36.24	22.15	192	..	..
1902	41,800	..	..	34.56	19.28	188	..	..
1903	42,400	..	..	37.14	19.92	175	1.13	3.14
1904	43,700	..	..	34.46	18.69	181	1.09	2.86
1905	44,000	..	..	33.88	16.79	150	0.82	2.32
1906	44,500	..	..	35.21	18.74	172	1.03	2.01
1907	45,000	..	..	33.77	18.46	155	1.02	2.89
1908	45,500	..	..	35.69	18.90	161	1.25	2.46
1909	46,500	..	..	34.70	17.36	135	0.94	2.68
1910	48,000	..	..	32.95	15.86	154	1.04	1.89
1911	51,000 (Census)	10,631	4.76	30.26	20.70	211	1.21	2.40
1912	51,500	..	..	30.38	14.46	100	0.54	1.80
1913	52,500	..	..	30.55	16.36	147	0.78	1.90
1914	54,000	..	..	30.51	17.77	155	1.00	2.09
1915	50,409	..	..	27.14	18.52	172	0.95	2.29
1916	53,512	..	..	25.94	15.27	111	1.09	2.77
1917	53,443	..	..	22.36	15.12	135	1.31	3.45
1918	53,116	..	..	23.94	28.73	161	1.75	4.72
1919	53,835	..	..	23.96	16.67	121	1.16	4.18
1920	53,739	..	..	32.58	14.53	129	0.74	3.03
1921	67,967 (Census)	13,547 (Ex. Wors. Com.)	4.67	29.10	15.30	114	0.93	3.15
1922	69,540	..	..	26.36	13.26	100	0.85	2.90
1923	70,120	..	..	24.91	12.26	97	0.91	2.21
1924	70,570	..	..	26.53	13.72	98	0.95	2.90
1925	71,170	..	..	23.66	13.82	107	0.76	2.85
1926	70,760	..	..	23.69	11.43	84	0.31	2.30
1927	73,790	..	..	20.80	12.67	98	0.65	2.71
1928	71,080	..	..	22.20	11.55	84	0.67	1.66
1929	71,700	..	..	21.34	15.36	121	0.79	3.45
1930	71,700	16,958	..	20.63	11.31	70	0.64	1.50
1931	72,160 (Census)	17,119	4.28	18.79	13.80	109	0.60	2.27
1932	71,900	17,139	..	20.05	11.80	85	0.70	1.60
1933	71,600	17,460	..	17.31	13.28	89	0.81	2.02

† Borough Extended 9. II. 21. to include Ardsley (7,058 pop.), Monk Bretton (5,139 pop.), and Worsboro' Common (2,100 est. pop.)

TABLE 36.

NUMBER OF DEATHS FROM THE SEVEN PRINCIPAL ZYMOTIC DISEASES DURING PREVIOUS YEARS.

	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933
Small-pox ...	...	...	2	1	5	3	...	...	...	...	...	...	...	...	...	No information available	No information available	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...
Measles ...	37	62	19	56	23	28	11	44	10	26	8	90	17	22	56			2	233	35	39	...	23	16	22	11	3	51	4	6	5	28	6	1
Scarlet Fever ..	14	18	6	2	11	8	17	10	12	3	1	2	10	7	5			2	...	3	...	2	1	...	2	6	...	2	...	4	4	1	1	...
Diphtheria ..	19	10	19	9	9	4	7	4	1	...	2	4	7	7	1			4	6	2	2	5	5	8	3	3	1	4	6	2	1	1	3	14
Whooping Cough	26	13	11	4	27	3	17	24	32	1	53	12	24	6	31			11	15	9	10	13	21	5	6	13	8	27	3	29	5	7	8	3
Typhoid Fever ..	7	32	18	10	19	8	7	11	16	10	7	11	5	1	4			5	2	1	1	...	...	...	1	1	1	1	...	2	1	...	...	2
Diarrhœa ...	58	87	53	62	99	51	99	53	76	43	57	153	13	65	62			28	32	26	51	41	25	24	39	37	32	9	14	12	11	8	14	10
TOTALS ..	161	222	128	161	193	105	158	146	147	83	128	272	76	108	159			52	288	76	103	61	75	53	74	71	45	94	27	55	27	45	32	30
Zymotic Death Rate	4.02	5.41	3.06	3.79	4.42	2.38	3.55	3.24	3.23	1.78	2.66	5.30	1.48	2.06	2.93	3.29	0.99	1.09	10.55	3.79	2.06	2.01	1.37	1.45	1.69	1.69	1.00	1.69	0.64	1.91	0.56	1.03	0.87	1.08

TABLE 37.

NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED FROM 1900 TO 1933 INCLUSIVE.

	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933
Small-Pox ...	...	...	15	38	89	59	...	...	...	...	...	...	...	...	...	No information available	No information available	...	...	...	...	...	...	...	7	...	...	...	11	68	30	4	...	...
Scarlet Fever ...	297	396	346	105	222	255	244	249	240	104	84	118	170	72	170	No information available	No information available	20	30	134	90	90	136	81	191	238	169	170	186	845	347	136	376	195
Diphtheria ...	47	43	52	52	56	29	45	24	16	11	22	34	62	73	54	No information available	No information available	24	56	29	52	70	78	87	66	94	78	73	145	101	97	49	77	145
Typhoid Fever ...	87	164	86	58	78	66	53	47	78	58	23	52	29	14	17	No information available	No information available	12	5	11	8	7	9	13	4	7	8	8	5	6	6	3	1	2
TOTALS ...	431	603	499	253	445	409	342	320	334	173	129	204	261	159	241			56	91	174	150	167	223	181	268	339	255	251	347	1020	480	192	454	342

TABLE 38.

AGE DISTRIBUTION OF INFECTIOUS DISEASES NOTIFIED DURING 1933 (EXCLUDING TUBERCULOSIS)

Notifiable Disease.	No. of Cases Notified in Barnsley during 1933.									Total Cases in each Ward.									Barnsley Cases Removed to Hospital during 1933.	
	At all Ages.	Under 1 year.	1 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 years and upwards.	North Ward.	South Ward.	East Ward.	West Ward.	South-East Ward.	South-West Ward.	Central Ward.	Ardsley Ward.	Monk Bretton Ward.	Kendray Hospital.	Jessop Hospital,	TOTAL.
Pneumonia ..	219	9	73	45	20	38	24	10	27	10	18	19	22	10	25	27	61	...	...	...
Scarlet Fever ...	195	...	41	105	32	15	2	...	31	18	23	24	18	21	9	26	25	183	...	183
Diphtheria ...	145	...	14	97	23	10	1	...	15	14	13	6	28	15	18	10	26	142	...	142
Enteric Fever ..	2	...	...	...	1	...	1	...	1	1	...	...	...	...	...	...	...	1	...	1
Puerperal Fever ...	11	...	...	...	4	7	...	...	1	...	3	3	...	...	...	2	2	9	2	11
Puerperal Pyrexia ..	8	...	...	...	2	6	...	...	1	...	1	3	2	...	...	1	...	3	2	5
Erysipelas	46	1	1	6	4	9	10	15	4	4	4	13	3	3	1	10	4	1	...	1
Ophthalmia Neonatorum ..	12	12	...	...	...	...	...	...	1	2	...	...	2	...	1	1	5	...	...	...
Cerebro-Spinal Meningitis ..	23	1	6	8	2	6	...	...	...	2	4	2	...	...	6	2	7	22	...	22
Poliomyelitis ...	1	...	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Encephalitis Lethargica ...	2	1	1	1	1
TOTALS ..	664	23	136	261	89	92	38	25	81	51	66	71	76	50	60	79	130	361	4	365

9
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TABLE 39.

Notifiable Infectious Diseases (excluding Tuberculosis)—
Table shewing monthly Prevalence during 1933.

Notifiable Disease.	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Pneumonia ...	58	15	24	14	13	7	8	6	13	9	27	25	219
Scarlet Fever ...	20	18	22	25	14	12	10	11	13	16	12	22	195
Diphtheria ...	4	4	6	6	7	3	16	20	18	27	16	18	145
Enteric Fever ...	...	...	...	1	...	1	...	...	...	...	...	...	2
Puerperal Fever ...	...	...	1	1	...	1	3	...	2	2	...	1	11
" Pyrexia ...	2	...	1	1	...	...	...	2	1	...	1	...	8
Erysipelas ...	3	...	3	5	8	...	3	4	4	5	6	5	46
Ophthalmia Neonatorum	1	1	3	3	...	...	...	...	2	...	1	1	12
Encephalitis Lethargica	...	...	...	...	...	...	...	...	...	2	...	...	2
Poliomyelitis ...	...	...	...	...	...	1	...	...	...	...	...	...	1
Smallpox ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cer'bro-SpinalM'ningitis	7	2	4	2	...	...	4	...	2	1	1	...	23
Total ...	95	40	64	58	42	25	44	43	55	62	64	72	664

TABLE 40.
SUMMARY OF NOTIFIABLE DISEASES.

Disease.	Total Cases Notified.	Cases admitted to Hospital	Total Deaths
Pneumonia	219	...	91
Scarlet Fever	195	183	...
Diphtheria	145	142	14
Enteric Fever	2	1	2
Puerperal Fever	11	11	5
„ Pyrexia	8	5	
Erysipelas	46	1	4
Ophthalmia Neonatorum	12	...	...
Cerebro-Spinal Meningitis	23	22	9
Poliomyelitis	1	...	1
Encephalitis Lethargica	2	...	3
Tuberculosis—			
(a) Pulmonary —M. 51; F. 41	92	...	58
(b) Non-Pulmonary—M. 47; F. 38	85	...	12
Totals	841	365	199

Reference to the foregoing Tables will show the incidence of notifiable diseases in the Borough during 1933.

For purposes of comparison with previous years, the following Table is appended:—

TABLE 41.

	1928	1929	1930	1931	1932	1933
Scarlet Fever	186	845	347	136	376	195
Pneumonia	204	343	146	190	155	219
Diphtheria	145	101	97	49	77	145
Erysipelas	40	61	43	49	59	46
Puerperal Pyrexia	20	14	5	14	9	8
Puerperal Fever	4	4	7	12	10	11
Enteric Fever	5	6	6	3	1	2
Ophthalmia Neonatorum...	8	11	22	8	21	12
Cerebro-Spinal Meningitis	...	1	3	89	34	23
Smallpox	11	68	30	4	...	...
Encephalitis Lethargica...	...	...	...	5	...	2
Poliomyelitis ... ..	...	...	...	2	...	1
Total	623	1454	706	561	927	664

Cerebro-spinal Fever has continued to decrease in incidence, 23 cases being notified in the County Borough area as against 34 cases the previous year, and 89 cases in 1931. Nine of of these 23 cases died, giving a mortality rate of 39%.

As forecast in last year's Report, Diphtheria has been much more widely prevalent throughout the year as well as much more fatal. 145 cases of the disease were notified during the year as occurring in the County Borough area, this being much the largest incidence of the present century; of these 14 died, giving a mortality rate of 9.6%. The attack rate is 2.02 per 1,000. The disease will be further considered under the report on Kendray Hospital.

TABLE 42.

KENDRAY AND LUNDWOOD HOSPITALS.—ANNUAL TABLE FOR 1933.

NAME OF DISTRICT.	Cases in Hospital, 1/1/1933.					Cases Admitted in 1933.					Cases Discharged in 1933.					Died 1933.					Cases in Hospital, 31/12/1933.					Operations performed			
	Miscellaneous.	Enteric Fever.	Diphtheria.	Scarlet Fever.	Total.	Miscellaneous.	Enteric Fever.	Diphtheria.	Scarlet Fever.	Total.	Miscellaneous.	Enteric Fever.	Diphtheria.	Scarlet Fever.	Total.	Miscellaneous.	Enteric Fever.	Diphtheria.	Scarlet Fever.	Total.	Miscellaneous.	Enteric Fever.	Diphtheria.	Scarlet Fever.	Total.	Tracheotomy	Mastoids	Tonsillectomy	Removal of Retained Products
Barnsley C.B.C. ..	2	...	8	44	54	66	1	141	181	389	46	1	106	203	356	20	...	14	...	34	2	...	29	22	53	1	1	5	2
Barnsley R.D.C.	1	1	2	...	...	5	10	15	...	...	5	9	14	...	...	1	...	1	...	...	...	2	2	...	...	...	...
Cudworth U.D.C.	6	2	8	3	...	25	77	105	1	...	23	73	97	2	...	1	...	3	...	...	7	6	13	...	...	...	...
Darfield U.D.C.	2	2	...	...	13	16	29	...	...	2	18	20	...	...	1	...	1	...	...	10	...	10	...	...	...	...
Darton U.D.C.	1	1	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dodworth U.D.C.	3	3	1	...	1	9	11	1	...	...	11	12	...	...	...	...	...	...	...	1	1	2	...	...	...	...
Hoyland U.D.C.	11	11	...	...	1	...	1	...	...	...	11	11	...	...	1	...	1	...	...	...	...	...	1	...	...	...
Royston U.D.C.	1	1	2	4	...	2	17	23	1	...	3	15	19	3	...	...	...	3	...	...	...	3	3	...	...	...	...
Wombwell U.D.C.	2	15	17	1	...	24	56	81	1	...	18	64	83	...	...	3	...	3	...	...	5	7	12	1	...	...	...
Worsborough U.D.C.	3	12	15	...	...	7	15	22	...	...	10	27	37	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals ..	2	...	21	91	114	75	1	219	382	677	50	1	167	432	650	25	...	21	...	46	2	...	52	41	95	3	1	5	2

Daily Average of Occupants for 1933:—

Patients	...	...	68·9.
Nursing Staff	...	...	22·2.
Domestic Staff	...	...	18·3.

Average Number of Days spent in Hospital by Patients suffering from:—

Enteric Fever	...	...	...	23·50 days.
Scarlet Fever	...	...	...	35·60 days.
Diphtheria	...	...	...	47·21 days.

The 46 Deaths which occurred were certified as follows:—

Diphtheria	...	...	...	19	Diphtheria with Tracheotomy	2	Cerebro-Spinal Meningitis	...	...	11
Tubercular Meningitis	...	...	...	2	Pneumococcal Meningitis	...	2	Erysipilas and Streptococcal Meningitis	...	2
Marasmus due to Prematurity	...	...	...	2	Lobar Pneumonia	...	1	Cerebral Hæmorrhage and Diabetes	...	1
Arterio Sclerosis and Heart Disease	...	...	...	1				Meningitis and Otitis Media	...	1

LUNDWOOD HOSPITAL was open during the following periods for nursing convalescent cases of Scarlet Fever:—

11th November, 1932, to 7th January, 1933.

15th February, 1933 to 28th March, 1933.

KENDRAY HOSPITAL.

Reference to Table 42, page 86, gives the number of cases admitted to the Hospital.

Cerebro-Spinal Fever.

There were admitted to the Hospital 29 cases of Cerebro-Spinal Fever, 23 of these being from the County Borough area. 11 deaths occurred, giving a mortality rate of 37%.

Scarlet Fever.

There were 382 cases of this disease admitted during the year, as compared with 564 cases in 1932. 181 were from the County Borough area. No deaths occurred from the disease and, despite its mildness, this result is, in my opinion, due, in large measure, to the routine use of antitoxic serum. As during the previous year, scarlatinal rheumatism and cardiac bruits have been unduly common, nephritis and adenitis noticeably rare.

Diphtheria.

219 cases were admitted during the year, compared with 144 in 1932 and 133 in 1931. 141 cases were from the County Borough area. 21 deaths occurred from the disease (2 of these from Laryngeal Diphtheria for which tracheotomy had been performed), giving a mortality rate of 9.6%. The mortality rate during the previous year was 4.1%.

The unpleasant experience of an increase in the virulence of the disease as well as in its prevalence has been shared by many Authorities in the West Riding and has been more or less expected, following the investigations of the Leeds workers on the prevalence of a slightly different strain of diphtheria bacillus. This strain, which is distinguishable by Laboratory tests, also presents a slightly different clinical picture and the cases respond less readily to antitoxin. As a result, the amount of antitoxin given during the year has been considerably increased and more use has been made of intravenous injections. It is noticeable that in the West Riding it is the non-textile areas which have been the chief sufferers.

The following Table 43 gives particulars of the fatal cases treated in the Hospital during the year. It will be observed that only two of these cases were admitted to hospital as early as the second day of the disease and only seven on the third day. The remaining twelve were admitted on the fourth day or later. Death occurred from periods which averaged

from as soon as two hours after admission to as late as the fiftieth day after the administration of the serum. Success in the treatment of this type of diphtheria is dependent upon early diagnosis and the prompt use of large doses of anti-toxin intravenously.

TABLE 43.
KENDRAY HOSPITAL—DIPHTHERIA DEATHS, 1933.

Initial	Age	Area	Date Admitted to Hospital	Day of Disease	Dose of Serum		Death		No. of d'ys after Serum
					Intramuscularly	Intravenously	Date	Day of Disease	
B.L.	2½	Cudworth	18 1 33	Fifth	72,000	...	24 1 33	Tenth	Fifth
J.C.	6	Barnsley	2 2 33	Fifth	120,000	...	11 2 33	Fourteenth	Ninth
K.S.	4	Wombwell	15 2 33	Third	92,000	24,000	20 2 33	Eighth	Fifth
M.R.	1½	Wombwell	16 2 33	Fourth	120,000	...	17 2 33	Fifth	One
M.A.	4	Wombwell	17 2 33	Second	100,000	...	17 2 33	Second	same day
H.B.	3	Barnsley	20 2 33	Third	86,000	...	21 2 33	Fourth	One
D.E.	4½	Barnsley Rural	12 3 33	Third	96,000	...	13 3 33	Fourth	One
C.W.	4½	Barnsley	17 3 33	Eighth	32,000	...	17 3 33	Eighth	Sameday
J.F.	4	Barnsley	10 4 33	Sixth	64,000	...	20 4 33	Sixtee'th	Tenth
E.P.W.	6	Barnsley	4 5 33	Seventh	144,000	...	6 5 33	Ninth	Second
A.F.	13	Barnsley	25 7 33	Fourth	40,000	40,000	26 8 33	Thirty-sixth	Thirty-Second
J.D.	10	Barnsley	3 8 33	Third	40,000	30,000	11 8 33	Eleventh	Eighth
W.I.E.	2	Barnsley	12 8 33	Fifth	100,000	...	18 8 33	Eleventh	Sixth
R.R.	17	Barnsley	1 9 33	Sixth	32,000	...	1 9 33	Sixth	Sameday
B.E.	6	Barnsley	27 9 33	Third	96,000	...	10 10 33	Sixtee'th	Thirti-enth
E.D.	5	Darfield	12 10 33	Third	72,000	30 000	16 10 33	Seventh	Fourth
H.L.	6	Barnsley	10 10 33	Third	80,000	...	17 10 33	Tenth	Sev nth
C.B.	6	Barnsley	25 10 33	Second	80,000	...	14 12 33	Fifty-Second	Fiftieth
D.P.	5	Barnsley	16 11 33	Fourth	104,000	...	22 11 33	Tenth	Sixth
D.W.	20	Barnsley	4 12 33	Fifth	104,000	...	13 12 33	Fourteenth	Ninth
C.E.	6	Elsecar	26 12 33	Seventh	20,000 (Includes 4,000 before Admission)	...	26 12 33	Seventh	Sameday

LUNDWOOD HOSPITAL.

Lundwood Hospital was open from the 11th November, 1932, to the 7th January, 1933, and from the 15th February, 1933, to the 28th March, 1933, for the reception of convalescent cases of Scarlet Fever.

MATERNITY AND CHILD WELFARE.

Maternity and Child Welfare Centres.

A full list of Clinics is given on page 30 of this Report.

TABLE 44.

COUNTY BOROUGH OF BARNSLEY. MATERNITY AND CHILD WELFARE.

1. Population of the area served by the Council 71,900
(estimated mid-1932)
2. Number of births notified in that area during the year under the Notification of Births Act, 1907, as adjusted by any transferred notifications:
 - (a) Live births 1,264 (b) Still births 55 (c) Total 1,319
 - (d) By midwives 1,090 (e) By doctors and parents 229
3. Health Visiting.
 - (i) Number of officers employed for health visiting at the end of the year:

(a) by the Council	.....	7
(b) by Voluntary Associations	.....	Nil
 - (ii) Equivalent of whole-time services devoted by the whole staff to health visiting (including attendance at infant welfare centres)—

(a) in the case of Health Visitors employed by the Council	.....	5
(b) in the case of Health Visitors employed by Voluntary Associations	.....	Nil

(iii) Number of visits paid during the year by all Health Visitors:

(a) To expectant mothers	.....	First visits	281
		Total visits	542
(b) To children under 1 year of age	.....	First visits	1,294
		Total visits	7,714
(c) To children between the ages of 1 and 5 years			
		Total visits	9,261

4. Infant Welfare Centres.

(a) Number of Centres provided and maintained by the Council	.....	4
(b) Number of Centres provided and maintained by Voluntary Associations	.....	Nil

(c) Total number of attendances at all Centres during the year:

(i) By children under 1 year of age	.....	22,221
(ii) By children between the ages of 1 and 5 years		2,525

(d) Total number of children who attended at the Centres for the first time during the year and who, on the date of their first attendance, were:—

(i) under 1 year of age	.....	917
(ii) between the ages of 1 and 5 years	.....	118

(e) Total number of children who attended at the Centres during the year and who, at the end of the year were:—

(i) under 1 year of age	.....	861
(ii) between the ages of 1 and 5 years	.....	1,113

(f) Percentage of notified live births represented by the number in (d) (i)

5. Ante-natal clinics (whether held at Infant Welfare Centres or at other premises):

72.54

(a) Number of Clinics provided and maintained by the Council	3
(b) Number of Clinics provided and maintained by Voluntary Associations	Nil
(c) Total number of attendances by expectant mothers at all Clinics during the year	2,184
(d) Total number of expectant mothers who attended at the Clinics during the year	513
(e) Percentage of total notified births (live and still) represented by the number in (d)	38.89

Maternity Homes and Hospitals.

Maternity beds in the town are available in three different Institutions: the Municipal Maternity Home at Pindar Oaks with 7 beds, the Municipal Institution at Gawber Road with 4 beds, and the Beckett Hospital, Barnsley, with 2 beds for complicated cases. Cases of Puerperal Fever and Puerperal Pyrexia needing Institutional Treatment are sent either to the Kendray Hospital, Barnsley, or the Jessop Hospital, Sheffield.

During the year 200 women were admitted to Pindar Oaks and 26 to Gawber Road. In addition, 16 women were treated on the responsibility of the County Borough Council either at the Jessop Hospital or at Kendray Hospital, and three others, involving no financial responsibility, at the Jessop Hospital.

Municipal Maternity Home.

The total number of cases treated at the Home has been as follows:—

1925	.....	.....	.....	144
1926	.....	.....	.....	123
1927	.....	.....	.....	120
1928	.....	.....	.....	107
1929	.....	.....	.....	126
1930	.....	.....	.....	163
1931	.....	.....	.....	167
1932	.....	.....	.....	175
1933	.....	.....	.....	200

It will be noted that more patients have been admitted to the Municipal Maternity Home than in any previous corresponding period.

Of the 200 cases admitted to the Municipal Maternity Home during the year, 153 were delivered by Midwives and 47 by Doctors, medical assistance being sought in 37 cases. The average duration of stay in the Home was two weeks.

One maternal death occurred from heart failure. Ten infants were stillborn and two died within ten days of birth, from Prematurity.

26 maternity cases were admitted to the Municipal Hospital at Gawber Road during the year, the average duration of stay being 16 days. Twenty-one of these cases were attended by Midwives and five by Doctors. One infant was stillborn and one died within ten days of birth, from congenital malformation of the heart.

Mr. W. W. King, the Visiting Consultant, has been called upon during the year for three visits to the Kendray Hospital, one to the Beckett Hospital and one to the Municipal Maternity Home.

Homes and Hospitals for Sick and Ailing Children under 5 years of Age.

No special Children's Hospital exists in the County Borough area.

The Municipal Institution has available 8 beds for the treatment of sick children, to which 26 patients under five years were admitted during the year, and the Beckett Hospital 32 beds, to which 232 children under five were admitted during the year. The Council, in addition, provides Institutional orthopædic treatment at the Yorkshire Children's Orthopædic Hospital, Kirbymoorside, to which six children under five years of age were admitted during the year.

Convalescent Homes.

None.

Homes for Mothers and Babies.

None.

Day Nurseries.

None.

Infectious Diseases.

Disease.	Number of cases notified during the year.	Number of cases visited by officers of the Council.	Number of cases for whom home nursing was provided	Number of cases removed to hospitals.
(1) Ophthalmia Neonatorum	12	12	Nil	3
(2) Pemphigus Neonatorum	Nil	1	Nil	Nil
(3) Puerperal Fever	11	1	Nil	11
(4) Puerperal Pyrexia	8	3	Nil	8
(5) Measles and German Measles (in children under 5 years of age)	Not Notifiable	68	Nil	Nil
(6) Whooping Cough (do.)	do.	160	Nil	Nil
(7) Epidemic Diarrhœa (do.)	do.	136	Nil	Nil
(8) Poliomyelitis (do.)	1	1	Nil	Nil

Home Nursing.

The Barnsley and District Nursing Association employs two District Nurses who, in addition to their work, pay visits to sick children under the age of five years and undertake maternity nursing. 19 such cases were attended during the year.

Midwives.

In addition to the Midwives engaged as Nurses at the Beckett Hospital or the Municipal Institution, there are 31 Midwives practising in the County Borough area, of whom three are engaged in whole-time indoor practise at the Municipal Maternity Home. 1,234 cases were attended by Midwives during the year and 19 as Maternity Nurses.

The following Table gives some idea of the varying amount of work undertaken by the Midwives:—

TABLE 45.

1 Trained Midwife attended	.....	150—200 cases
2 Trained Midwives attended	.....	120—150 cases
2 Trained Midwives attended	.....	75—100 cases
4 Trained Midwives attended	.....	50—75 cases
4 Trained Midwives attended	.....	20—50 cases
11 Trained Midwives attended	.....	20 or under
1 Trained Midwife attended		no cases.

-
- 1 Bona-Fide Midwife attended only 2 cases.
 1 Bona-Fide Midwife attended no case.
-

- 3 Trained Midwives at the Municipal Maternity Home attended 200 cases.

TABLE 46.

In 289 cases (31%) medical aid was summoned by a Midwife under Section 14 (1) of the Midwives Act, 1918, as compared with 291 (25.5%) in 1932.

Abortion	.....	1
Adherent or Retained Placenta	.....	13
Ante-partum or Post-partum Hæmorrhage	.....	20
Condition of Mother	.....	11

Condition of Baby	7
Complications of Pregnancy	6
Deformity and Malformation	6
Delayed, Difficult, Prolonged, Obstructed and Premature Labour	53
Discharging or Inflamed Eye.....	10
Feeble Baby/ies	16
Fits	1
Malpresentation	13
Maternal Distress	7
Miscarriage	2
Persistent Occipito Posterior	5
Premature Birth	10
Placenta Prævia	1
Pemphigus	1
Prolapse of Cord	2
Puerperal Pyrexia	1
Rise of Temperature	4
Ruptured or torn Perineum	89
Stillbirth	4
Twin Pregnancy	2
Uterine Inertia	4
	<hr/>
	289

TABLE 47.

The total number of cases attended by Midwives during 1933 was made up as follows:—

200	cases were attended by Trained Midwives in the Municipal Maternity Home.
16	cases were attended in the Private Nursing Home.
19	cases were attended by the District Nurses.
1,016	cases were attended by Trained Midwives.
2	cases were attended by Untrained Midwives.
<hr/>	
1,253	cases were attended in 1933, compared with 1,384 for the year 1932.
<hr/>	
33	cases attended by Trained Midwives were stillbirths.
2	cases attended at the Private Nursing Home were stillbirths.
	1 case attended by an Untrained Midwife was a stillbirth.

TABLE 48.

Barnsley, Ardsley, Monk Bretton and Lundwood Infant Welfare Centres.

Annual Report for 1933.

	Barnsley	Ardsley	Monk Bretton	Lund- wood	Total
Number of new cases seen by M.O. during 1933, and who on their first attendance were :—					
0—1 years ...	581	123	75	188	917
1—5 „ ...	75	17	10	16	118
Number of cases who were on books on 1/1/1933, and seen by M.O. during 1933 :—					
0—1 years ...	339	66	50	119	574
1—5 „ ...	185	54	16	49	304
Number of cases remaining on books on 31/12/1933 :—					
0—1 years ...	334	73	45	114	566
1—5 „ ...	182	39	27	58	306
Total number of children who attended the Centres during the year and who at the end of the year were :—					
0—1 years ...	541	120	66	134	861
1—5 „ ...	666	156	85	206	1113
Total Attendances	18854	3844	1326	4891	28915
Expectant Mothers—					
Number of cases	265	72	...	176	513
Total number of attendances made by above cases ...	1091	328	...	767	2186
Number of slides examined ...	16	5	...	...	21
School Children—					
Number of attendances made by School Children for the purchase of Drugs, etc., (not included in M. & C. W. section)	1352	547	22	64	1985

TABLE 49.

The children under one year of age attending the Infant Welfare Centres represent 71.19% of the births notified during the year.

		Barnsley		Ardsley		Monk Bretton		Lund- wood	
		Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year
No.	making 1 visit ...	139	108	24	31	12	11	32	28
"	" 2 visits ...	96	46	16	14	12	6	20	6
"	" 3 " ...	50	25	8	8	9	6	8	9
"	" 4 " ...	57	24	9	8	9	2	13	7
"	" 5 " ...	37	11	13	4	3	1	12	2
"	" 6 " ...	48	16	7	9	5	1	10	4
"	" 7 " ...	39	9	7	2	3	1	9	4
"	" 8 " ...	40	7	7	1	4	1	14	2
"	" 9 " ...	39	9	9	3	4	1	7	5
"	" 10 " ...	15	4	13	2	10	...	10	6
"	" 11 " ...	35	9	6	2		1	8	6
"	" 12 " ...	25	11	6	11	8	...	6	2
"	" 13 " ...	37	9	5	...	1	...	9	2
"	" 14 " ...	37	5	2	1	8	...	17	3
"	" 15 " ...	23	1	5	1	4	...	9	2
"	" 16 " ...	17	1	14	...	2	3	20	6
"	" 17 " ...	22	2	2	...	7	1	7	2
"	" 18 " ...	17	5	4	...	4	1	6	...
"	" 19 " ...	7	3	1	2	4	1	3	...
"	" 20 " ...	4	2	5	...	5	..	4	1
"	" 21 " ...	6	...	4	...	1	...	3	1
"	" 22 " ...	3	...	2		11	37	1	...
"	" 23 " ...	2	...	1	1	...	...	2	1
"	" 24 " ...	2	...	1	...	...	...	3	...
"	" 25 " ...	2	...	1	...	...	...	1	...
"	" 26 " ...	2	...	2	...	...	...	...	...
"	" 27 " ...	1	...	2	...	...	...	...	...
"	" 32 " ...	...	...	...	...	...		1	...

TABLE 50.

MILK (MOTHERS AND CHILDRENS) ORDER, 1921.
Cows Milk and Dried Milk, Free, and Reduced Rates.
Year ended 31st December, 1933.

		Barnsley.			Ardsley.			Monk Bretton.			Lundwood			Total		
		£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
FREE MILK—																
Cow's Milk	...	403	6	3	80	11	3	42	2	9	138	11	3	664	11	6
Dried Milk	...	968	18	4	214	11	11	140	5	0	460	0	6	1783	15	9
Drugs	...	37	19	0	7	12	2	6	2	1	23	11	5	75	4	8
		1410	3	7	302	15	4	188	9	10	622	3	2	2523	11	11
MILK AT RE- DUCED RATES—																
Cow's Milk	...	2	8	5	...			4	9		2	6		2	15	8
Dried Milk	...	9	5	1	2	12	0	1	19	5	3	0		13	19	6
Drugs	...	1	7	2			5	1	0			5		1	9	0
		13	0	8	2	12	5	2	5	2	5	11		18	4	2
Total Cost to the Committee																
1933	1933	1423	4	3	305	7	9	190	15	0	622	9	1	2541	16	1
1932	1932	1045	11	5	219	2	0	124	12	2	402	1	1	1791	6	8
Receipts for the year																
1933	1933	957	5	5	146	5	1	36	4	1	121	6	10	1261	1	5
1932	1932	1037	5	11	152	17	11	36	9	0	90	1	0	1316	13	10

12 cases of Ophthalmia Neonatorum were notified during the year and all were satisfactorily treated under the scheme in operation.

TABLE 51.

OPHTHALMIA NEONATORUM.—12 Cases Notified.

Treated by:—	Recovery Vision Unim- paired.	Vision Im- paired.	Total Blind- ness.	Left District.	Deaths.
Private Practitioner and Health Visitor...	7	...	...	...	1
M.O., I.W.C. and Health Visitor ...	...	...	...	...	...
M.O., I.W.C., H.V. and P.P. ...	1	...	...	...	...
Health Visitor ...	...	...	...	...	...
In Hospital (or Institution) ...	...	...	...	...	...
No Treatment required	...	...	...	...	...
Private Practitioner, Health Visitor and Hospital Treatment	3	...	...	...	...

Three Tables have been completed, which set forth the results of an analysis of new cases and new contacts, examined during the past three years, with special reference to children. Table A deals with "Contacts," Table B with "New Cases," while Table C presents the combined figures of these two classes.

By direction of the Ministry of Health, for purposes of the Annual Returns, cases are regarded as contacts only if the cause of their being examined is the fact that they have recently been, or still are, living in contact with some Dispensary patient, or other notified case; many persons who come to the Dispensary of their own accord, or who are referred by a doctor, may give a history of previous contact with a known case of tuberculosis, but this does not bring them within the definition of "contact."

Of the 111 "contacts" examined, 28 had been diagnosed by the end of the year as definite cases of tuberculosis, 11 being pulmonary, and 17 non-pulmonary cases.

Of 279 other new cases examined, who did not come under the above definition of "contact," 112 were diagnosed as tuberculous, 55 being pulmonary and 57 non-pulmonary.

Several interesting conclusions emerge from a consideration of the above tables.

- (1) Of the "New Cases," 40% were found to be tubercular, but of "Contacts," only 28%, in spite of the fact that more than half the "Contacts" had been exposed to risk of infection from a known positive case. The cause of this apparent anomaly lies, of course, in the fact that most of the "New Cases" were sent to the Dispensary because they were ill enough to be suspected of suffering from tuberculosis, whereas the "Contacts" did not usually attend because of illness, and the great majority were apparently in the best of health.
- (2) In Table A, the percentage of "Contacts" diagnosed tuberculous was greater in 1932 and 1933, than in 1931. This is probably due to the fact that in 1932 and onwards special attention was given to contacts of positive cases.

(3) In Table B "New Cases," and in Table C, it is noteworthy that as between 1932 and 1933 there is no increase in the total number of persons diagnosed as suffering from tuberculosis, and the same applies to the total number of tubercular children (Table C), yet the percentage of children found to be tuberculous, both as regards Table B and Table C is about 50% greater in 1933 than in 1932. This, I think, is probably due to the fact that the doctors who send new cases to the Dispensary are giving more heed to early suspicious signs and symptoms: if so, the same feature should be maintained in 1934. Before concluding these remarks regarding diagnosis, I will observe that good use has been made of the X-ray apparatus, no fewer than 449 examinations having been made with it during the year. A good X-ray film is invaluable to supplement ordinary methods of physical examination, as it is independent of the personal factor, and gives a purely objective picture of the part examined.

To arrive at a diagnosis in suspected cases of tuberculosis is often a matter of the utmost difficulty, and there is no doubt that X-rays can detect early signs of the disease, which do not reveal themselves to other methods of examination.

During the year a much-needed addition to the equipment was effected by the purchase of a "Potter-Buckey Diaphragm," at the extremely low cost of £15 (second-hand). By cutting out the scattered radiation, this accessory enables one to obtain much clearer films of deep-seated parts such as the hips and spine.

Certain alterations to the X-ray set, a very old low-powered model, have greatly increased its efficiency, enabling films of the chest to be taken at four feet distance in from 1/5th to 1/2 second, according to the size of the patient.

Recently I tried the plan, advocated by some, of varying the kilovoltage according to the size of the chest, but it was found that at kilovoltage of 50 or 55 there was hardly enough penetration, while above 60 kilovoltage, owing to the limitations of the set, there was a decided falling off in output. In order to get films of uniform quality and density I, therefore, developed a standardized technique, whereby every possible variable factor was kept constant: for example, every film of the chest is now taken at 60 kilovolts and 30 milliamperes,

the tube distance being 4 feet, if developed in standard developing tanks for exactly five minutes at a temperature of 65 degrees F. This reduces the variable factors to two, size of chest and time of exposure, the latter being adjusted against the former. In practice, I have found that the usual rule, to take the patients weight as a criterion of exposure, is quite unsatisfactory; as it results, in short stout people, that the exposure is much too short; whereas in abnormally tall thin people the weight rule gives films grossly over-exposed. By experiment I found that when all other factors remain constant, the exposure requires to be adjusted according to the square of the diameter of the chest. This is not so complicated as it sounds, inasmuch as for practical purposes the diameter may be taken as one-third of the girth of the chest.

• Using Ilford S.X. Screens, tube distance of 4 feet, and output of 60KV., the following simple formula gives the time of exposure with approximate accuracy:—

$$x = \frac{D^2}{M}$$

where x is time of exposure in tenths of a second. D is Diameter of chest in inches. M is number of milliamps passing through tube.

In the standardized technique, M is 30. We, therefore, only have to measure the chest to determine the exposure. For example, take a patient with a 33 inch chest, then—

$$x = \frac{11^2}{30}$$

Equals 4, i.e., 4/10 or .4 sec., which will be found to yield a correctly exposed film, under the conditions laid down above.

When using Potter Buckley Diaphragm for hip or spine cases, I find it best to keep to an exposure time of 5 seconds K.V. 60, and tube distance 30 inches, leaving the milliamps to be adjusted against the weight of the patient.

In practice, only one adjustment requires to be made, the milliampmeter being set, to give somewhere between 8 and 30 M.A., according to the weight and the part to be radiographed. One reason why a standardized method is of

importance in X-ray work is that one requires at times to compare X-ray films of the same patient, taken at different dates, therefore they should be taken under precisely similar conditions. Moreover, if the technique is varied at haphazard, there will be a much larger percentage of spoilt films, and more expense. In my experience, with methods properly standardized, spoilt films are rare. For diagnostic work in tuberculosis, the finest detail is required to demonstrate the earliest stages of tubercular invasion.

The means whereby perfect films may be uniformly obtained is, therefore, of supreme importance to the Clinical Tuberculosis Officer.

TABLE A.

Table showing Results of Examination of Contacts during the past Three Years.

	1931	1932	1933
1. Total contacts examined	131	205	111
2. Percentage of these which were contacts of positive cases	36	63	57
3. Number of contacts diagnosed tuberculous	19	43	28
4. This number as percentage of total examined	14 $\frac{1}{2}$	21	25
5. Percentage of children among total contacts	60	75	55
6. Percentage of children among tuberculous contacts	58	76	53
7. Total child contacts examined	80	146	61
8. Total tuberculous child contacts	11	33	15
9. Percentage of tuberculous among total child contacts	14	22	24

TABLE B.

Table shewing Results of Examination of "New Cases"
(not contacts) during the past three years.

	1931	1932	1933
1. Total "New Cases" examined.....	241	274	279
2. Total new cases diagnosed tuberculous	97	101	112
3. Number as percentage of all new cases examined	40	37	40
4. Number of children among new cases examined	85	117	116
5. Percentage of children among total new cases	35	41	41
6. Number of children found tuberculous	26	39	56
7. Percentage of children examined found tuberculous	30	33	48

TABLE C.

Table shewing Combined Figures of New Cases and New
Contacts examined during the past three years.

	1931	1932	1933
1. Total examined (children and adults)	372	479	390
2. Definitely Tuberculous	116	144	140
3. Tuberculous as percentage of total examined	36	30	31
4. Total new children examined	165	263	177
5. Definitely Tuberculous Children	37	72	71
6. Tuberculous children as percentage of total children examined	22	27	40

Treatment.

The Council's own Sanatorium at Mount Vernon contains 52 beds, to which patients recommended for Sanatorium treatment are admitted. The majority of the patients sent there are adult pulmonary cases, with a few sent for observation; there is also a separate unit of six beds for non-pulmonary and observation children (girls up to 14 and boys up to 6 years).

Orthopædic cases requiring special treatment, if adults, were sent to the Shropshire Orthopædic Hospital, Oswestry; if children, to the Yorkshire Children's Orthopædic Hospital, Kirbymoorside, and to the King Edward VII. Children's Orthopædic Hospital, Rivelin, near Sheffield. Other cases of surgical tuberculosis, e.g., tuberculosis glands of the neck, tuberculous kidney, etc., received treatment at the Beckett Hospital, Barnsley, where a few orthopædic cases were also treated.

The number of children recommended for attendance at the Open-Air School, Mount Vernon, was 73. The majority were early cases of *Tabes Mesenterica*, a few were "Lilum" or bronchial gland cases, and others were "pre-tubercular" contacts in a low state of health. These children do extraordinarily well and, on leaving the Open-Air School, are usually well on the road towards recovery. Unfortunately, lack of accommodation at the Open-Air School makes it impossible to deal with all who would benefit by attendance: for example children under the age of 7 years are excluded. Many other children, who showed signs that full-time attendance at school was hampering their recovery by making too great a demand on their limited stock of vitality, were with benefit certified for half-time attendance, with special instructions regarding rest at home. Of these, 45 children whose parents could not afford proper nourishment, were recommended for milk at School, and greatly benefitted in nearly every case. One great advantage of nourishment ordered in this way is that one is certain that the child really gets what is ordered, instead of it going into the "family pot."

Certain tubercular patients received ultra-violet light treatment at the Light Treatment Centre, which is carried on in conjunction with the Dispensary, chiefly children with non-pulmonary tuberculosis, where the natural tendency towards recovery is promoted by general light baths. Also certain cases of Tuberculosis of the Skin, nearly a dozen, were given local and general light treatment: these were adult patients. A separate section of this report reviews the work of the Light Treatment Centre.

Medicinal treatment can be obtained by insured persons from their panel doctors, but non-insured persons, who are too poor to pay for medical attention, have been supplied with medicine in a few special cases, or with cod liver oil, malt and oil, or virol, at cost price, or even free in necessitous cases.

It may be pointed out, however, that the Tuberculosis Dispensary is not primarily a centre for treatment, but for diagnosis, consultation and supervision, including after-care.

After-care.

There have been few cases of lapsed attendance since the "attendance card" system was adopted, whereby each patient has a note of the appropriate date for his next visit. Non-quiet cases are usually seen at intervals of 2, 4, or 8 weeks, quiet patients attend once in three or it may be six months, and, when arrested, once yearly is usually sufficient. By direction of the Ministry of Health, no patient can be removed from the Dispensary Register as "recovered" until arrest has been maintained for three years and in pulmonary cases this must be preceded by two years' quietness, i.e., freedom from all active signs or symptoms.

A matter of supreme importance is to see that all positive cases have a room, or, failing this, at least a bed, to themselves; as well as separate eating utensils.

It is surprising how ready even the poorest are to adopt these suggestions, but, too often, over-crowding is the difficulty. If possible the patient is persuaded to seek a more roomy habitation, and when he makes application for tenancy of one of the Council houses a letter is sent to the Housing Committee giving such relevant medical details as may help them to give favourable consideration to the application. Unfortunately, there are still many cases of over-crowding as the applicants for new houses greatly outnumber the houses available. In cases where the income is insufficient to provide the patient with nourishment adequate to his recovery, information as to the medical position is sent by letter to the Public Assistance Committee and I gratefully acknowledge their readiness to assist these cases whenever they find it possible to do so.

When a temporary grant of extra nourishment is required to tide the patient over an emergency, a recommendation is laid before the Medical Officer of Health and a grant of, say, one egg and one pint of milk per day for a period up to four weeks may be made by the Public Health Services Committee. Several urgent cases have been saved from breakdown by such temporary help during 1933.

Re-employment after recovery is a very difficult problem at the present time. Few consumptives can be safely advised to resume work in a coal mine, and among those who do the percentage of breakdowns is high. A few are lucky enough to have their jobs kept open till they are fit to go back. Some have had periods of outdoor work, e.g., on the roads, through the Local Employment Exchange, and it is remarkable how the patient usually improves in weight and general health in spite of having to exert himself all day. Men unable to find work are usually advised, if fit, to go in for allotment gardening, and a number have been able to do so, with great benefit. Others, however, have been unable to afford the purchase price to secure the tenancy of an allotment and it is suggested that this difficulty might be got over either by giving monetary help, or by reserving certain allotment gardens to be left to approved Tuberculous Dispensary patients.

Occasionally an open-air shelter has been loaned to a patient, but suitable sites are rarely available so it is not often possible to employ this method of supplementing the available housing accommodation however ideal a plan it may be in theory.

In connection with after-care, mention must be made of the orthopædic arrangements.

Mr. Crockatt, Surgical Superintendent of the Yorkshire Children's Orthopædic Hospital, Kirbymoorside, attends at the School Clinic at intervals to advise in regard to bone and joint cases, and tuberculous children in this category attend his Clinic from time to time; occasionally also adult orthopædic cases are referred to him.

A much needed structural improvement has been the re-roofing of the annexe containing the patients' lavatory and developing room; also a permanent fence has been erected cutting off the Dispensary approach from that of the adjacent Unemployed Recreation Centre; thus ensuring quietness for clinical examinations which was previously lacking.

C.—MOUNT VERNON SANATORIUM.

Descriptive.

This is a mixed Sanatorium—men, women and children—and the beds number 52, all being now available for Barnsley patients.

Although situated only two miles from the centre of Barnsley, the air is surprisingly fresh and fairly free from smoke, due to the altitude, 560 feet. The prevailing south-west and west winds come off the moors above Penistone, and blow down the valley of the Dove, thereby causing the chimney smoke of the adjacent suburb of Ward Green to drift away eastwards without rising to the level of the Institution. When the wind blows from the east or south-east, however, the purity of the air is noticeably affected by atmospheric pollution from certain large collieries in that direction.

The administration block is a substantial old mansion of no little historic interest, which has a pleasant outlook southwards across a green valley towards the wooded slopes between Rockley and Wentworth Castle. The patients' pavilion, also, has a southern aspect, and is sheltered from strong winds by a wall, beyond which is a strip of woodland which affords a pleasant vista for the eyes of the sick.

The grounds have been well laid out by previous occupiers of the property, the spacious lawns being dotted here and there by fine old trees, bordered by flower beds, and intersected by asphalt paths. The remainder of the ground is well laid out as a vegetable garden, which is intensively cultivated with the help of convalescent patients, and yields two crops a year. Along the paths are many fine old apple trees, trained on fences, which usually make a striking display of blossom in the spring. Although one sometimes feels that home troubles might be less insistent if patients' homes were further away, yet, on the other hand, the fact that they can keep in touch with those near and dear to them undoubtedly helps many to settle.

About one third of the patients occupy detached huts, which are most pleasantly situated, away from the main pavilion; each accommodates one convalescent patient who makes it his "cabin aboard ship" during his stay. The remaining two thirds occupy the main pavilion, which has a wide verandah and Sister's Duty Room in the centre, dividing the men's from

the women's end. Most of the rooms hold two patients with one or two single wards on each side. A few of the rooms have radiators, which make them useful when such complications as pneumonia, pleurisy and bronchitis are encountered.

A large room of six beds, situated at the end of the women's wing and provided with separate bathroom and lavatory, the whole being treated by radiators, is reserved for six children, who are kept strictly apart from the adults, being non-pulmonary or observation cases. In passing, it may be mentioned that all eating utensils used by patients are electrically sterilized after use, and all bedding passed through a low pressure steam disinfectant, before being dealt with at the Sanatorium laundry, which is situated on the premises.

Treatment.

On the 1st January, 1933, there were 42 patients in residence, of whom six were observation cases. During the year 96 were admitted, 5 being observation cases, 83 discharged (including 11 observation), and 16 died, leaving in the Institution on the 31st December, 39 patients, none of whom were observation cases. The average number of patients in residence was 45, and the average stay of each patient 168 days.

Full details as to occupancy of beds and cases treated are shown in the Annual Tuberculosis Returns of the Ministry of Health, which are appended herewith. Taking the positive pulmonary cases, 42 in number, only 4 were quiescent on discharge, 24 not quiescent, and 14 died in the Institution. On the other hand, of 34 negative pulmonary cases, no fewer than 23 were quiescent, 9 not quiescent when discharged, and only 2 died in the Institution.

The fact that as many as 36 serious cases (Stages II and III) underwent courses of treatment in the Sanatorium for extended periods and that 14 of these were kept until death supervened indicates that the Institution makes a very definite contribution to the efforts being made to combat spread of infection.

Of 12 non-pulmonary cases discharged, 11 were quiescent on discharge, 10 of these being children.

Of 7 adults and 4 children discharged after a period of observation, 2 adults, and none of the children had been found to be tuberculous.

Of 20 children who concluded their treatment as definite cases of Tuberculosis, 1 was an advanced pulmonary case who died in the Institution, 8 others were classed as negative pulmonary, besides the 11 non-pulmonary. Altogether 18 children made a good recovery and were fit for school on discharge. The non-pulmonary children had a course of ultra-violet light treatment during their stay; and all, except the child who died, attended the Open-Air School while in the Sanatorium and the former Institution must, therefore, share the credit for the very remarkable improvement in health which was noticeable in nearly every child.

Rest remains by far the most important remedial measure in active tuberculosis, such as most patients are suffering from on entry to the Institution. Treatment commences in every case with absolute rest in bed, which is prolonged till the temperature has definitely settled and all acute symptoms have abated.

Further, the transition from absolute rest to exercise must be gradual lest a severe "auto-inoculation" should occur and bring about a relapse, by suddenly flushing the system with excess of toxins.

Judicious slight auto-inoculations by the patients own toxins are brought about by careful medical graduation of the patients' activities, and are entirely beneficial as they steadily raise his resistance to the disease, which is the aim. The closest possible medical supervision of the patient's activities may be termed the "keystone" of Sanatorium treatment and both patients and staff require to be patiently taught this point, in order to obtain the intelligent co-operation of all concerned, which is essential for the treatment to be of benefit.

Work is led up to by graded walking exercise, and is likewise graduated according to the nature of the case and the progress towards recovery, as indicated by the temperature, pulse and clinical signs. It is divided into three grades:—

Grade II: the highest domestic tasks.

Grade IIIA. Very easy gardening, use of trowel and handfork, pricking out plants, hand weeding.

Grade IIIB. Use of hoe, rake, digging fork.

Grade IV. Use of chopper, spade, wheelbarrow, lawn mower, and lawn roller.

I find that gardening is the most beneficial occupation, as not only are the muscles strengthened and the appetite and digestion improved, but the cheerful surroundings and hopeful atmosphere in which the work is carried out act as a valuable mental tonic. It is surprising to note the aptitude and interest shown by miners and other industrial workers who have hardly handled a garden tool before. It is clearly understood that although such work by patients may have some economic value, it is prescribed solely as treatment and is altered or suspended with one object in view, to promote the complete recovery of the patient.

As adjuvants to treatment, the following remedies were used during 1933:—

Sanocrysin (in oily suspension) was tried in one fairly severe case. Although the temperature was reduced, the patient continued to lose weight and the treatment was not continued as it was evident that no benefit was being derived.

Adexolin capsules, containing a concentrated preparation of Vitamins A and D in the same balanced ratio as that occurring in Cod Liver Oil, have been tried in severe acute cases, with quite encouraging results, and their use is, therefore being continued. Vitamin A is believed to increase the patient's resistance to infection, and Vitamin D plays an essential role in the body by enabling it to absorb calcium, an adequate supply of which is thought to be necessary to the proper functioning of the heart.

Collosal Calcium and **Hæmoplastin** have been used with good effect in hæmoptysis and the former is thought to promote healing and calcification of Tb. foci.

Ultra-Violet Light therapy was used in a number of non-pulmonary cases, with excellent results. It is definitely unsuitable for lung cases.

Recreation has not been neglected as the influence of a contented mind in promoting recovery can hardly be over-estimated. In this connection the patients have greatly appreciated the wireless set, which has been improved and re-modelled, the billiard table, and the various concert parties, to whom cordial thanks are due.

On the whole, the patients have shown marked appreciation of what is done to promote their recovery and have responded by co-operating intelligently in their treatment.

Improvements under consideration are:—

- (1) A Treatment Room to enable Artificial Pneumothorax treatment and similar procedures to be undertaken.
- (2) Linen Room, Mattress and Drying Rooms, coupled with extension of heating all the rooms in the main pavilion.
- (3) Further laundry facilities, to enable all patients' washing to be done.

The flooring of the patients' quarters was greatly worn and has been re-laid during the year.

The Staff has been increased by the appointment of an additional Nurse whereby working hours have been shortened with one day off per week. In consequence there have been noticeably fewer cases of sickness calling for medical treatment, so it is a fair assumption that the health of the staff has improved.

Two of our Probationers were successful in passing the final examination entitling them to the Tuberculosis Association's Certificate on completing their two years' training.

C. FERGUSON WALKER,

Clinical Tuberculosis Officer and Resident Medical Officer,
Mount Vernon Sanatorium.

TABLE 57.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

PART I. Summary of Notifications during the period from the 1st January, 1933, to the 31st December, 1933.

Age Periods	Formal Notifications.												
	Number of Primary Notifications of new cases of Tuberculosis.												Total Notifi- cations
	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and up- wards.	Total (all ages)	
Pulmonary Males	...	1	11	4	5	2	8	13	6	1	..	51	51
„ Females	...	...	2	3	4	9	14	5	3	1	...	41	44
Non-Pulmonary Males	3	6	18	15	...	...	2	1	...	1	1	47	49
„ Females	3	2	16	10	...	2	2	...	2	1	...	38	39

SUPPLEMENTAL RETURN.

PART II. New Cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

Age Periods	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and upwards.	Total Cases.
Pulmonary Males	1	1	3	...	2	...	...	7
„ Females	1	..	1	...	...	...	2
Non-Pulmonary Males
„ Females	1	...	...	...	...	...	...	...	...	1

The source or sources from which information as to the above-mentioned cases was obtained should be stated below:—

Source of Information.	No. of Cases.	
	Pulmonary.	Non-Pulmonary.
Death Returns { from local Registrars	5	...
transferable deaths from Registrar General	1	...
Posthumous notifications	1	1
“Transfers” from other areas (other than transferable deaths)	2	...
Other Sources if any (specify)	...	...

TABLE 58.
TREATMENT OF TUBERCULOSIS — BARNSELEY.

(A) Return showing the work of the Dispensary (or Dispensaries) during the year 1933.

Diagnosis.	PULMONARY.			NON-PULMONARY.			TOTAL.			GRAND TOTAL.
	Adults.		Children.	Adults.		Children.	Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	
A—NEW CASES examined during the year (excluding contacts):—										
(a) Definitely Tuberculous	25	26	2	2	3	18	28	36	20	112
(b) Diagnosis not completed	..	..	..	..	..	..	1	2	2	8
(c) Non-Tuberculous	..	..	..	..	..	..	36	31	25	159
										279
B—CONTACTS examined during the year:										
(a) Definitely Tuberculous	5	6	..	..	2	8	5	7	8	28
(b) Diagnosis not completed	..	..	..	..	..	..	1	2	1	4
(c) Non-Tuberculous	..	..	..	..	..	..	23	26	17	79
										111
C—CASES written off the Dispensary Register as:—										
(a) Recovered	1	3	2	..	1	4	2	5	4	15
(b) Non-Tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as Tuberculous)	..	..	..	..	..	..	91	63	47	267
										282
D—NUMBER OF CASES on Dispensary Register on December 31st:—										
(a) Definitely Tuberculous	111	95	33	41	13	87	124	127	128	497
(b) Diagnosis not completed	..	..	..	..	..	..	3	4	3	12
										509

1. Number of Cases on Dispensary Register on January 1st	476	8. Number of visits by Tuberculosis Officers to homes (including personal consultations)	297
2. Number of cases transferred from other areas and cases returned after discharge under head 3 in previous years	6	9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	2900
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	26	10. Number of— (a) Specimens of sputum, etc., examined (b) X-ray examinations made in connection with Dispensary work	225 449
4. Cases written off during the year as Dead (all causes)	55	11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above	3
5. Number of attendances at the Dispensary (including Contacts)	2154	12. Number of "T.B. plus" cases on Dispensary Register on December 31st	94
6. Number of Insured Persons under Domiciliary Treatment on the 31st Dec.	25		
7. Number of consultations with medical practitioners.— (a) Personal (b) Other	138 409		

(B) Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council 1
Provided by Voluntary Bodies Nil

(C) Number of beds available for the treatment of Tuberculosis on the 31st December in Institutions belonging to the Council.

Name of Institution.	For Pulmonary Cases.		For Non-Pulmonary Cases.		Total.
	Adults.	Children under 15.	Adults.	Children under 15.	
Barnsley Municipal Institution	4	...	...	...	4
Mount Vernon Sanatorium ...	40	4	2	6	52

(D) Return showing the extent of Residential Treatment and Observation during the year in Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

			In Institutions on Jan 1st.	Admitted during the year.	Disch'rg'd during the year.	Died in the Institutions.	In Institutions on Dec. 31st.
Number of doubtfully Tuberculous cases admitted for observation—							
Adults	M	...	3	3	6	...	...
„	F	...	...	1	1	...	...
Children	...	...	3	1	4	...	...
Total	...	...	6	5	11	...	...
Number of definitely Tuberculous patients admitted for treatment—							
Adults	M	...	22	36	28	9	21
„	F	...	9	35	24	6	14
Children	...	...	12	26	26	1	11
Total	...	...	43	97	78	16	46
Grand Total	...	...	49	102	89	16	46

(E) Return showing the extent of Residential Treatment provided during the year in Poor Law Institutions for persons chargeable to the Council.

		In Institutions on Jan. 1st	Admitted during the year	Discharged during the year	Died in the Institutions.	In Institutions on Dec. 31st.
Number of patients suffering from Pulmonary Tuberculosis admitted for treatment	Adult Males	1	6	1	5	1
	Adult Females	...	2	2	...	...
	Children	...	...	...	...	...
	Total ...	1	8	3	5	1
Number of patients suffering from Non-pulmonary Tuberculosis admitted for treatment	Adult Males	...	...	...	...	...
	Adult Females	...	3	1	2	...
	Children	...	1	...	...	1
	Total ...	...	4	1	2	1
Grand Total ...		1	12	4	7	2

The following is the report of the Senior Dental Surgeon, Mr. A. G. Moxon, L.D.S.:—

“DENTAL TREATMENT OF MATERNITY AND CHILD WELFARE AND TUBERCULOUS PATIENTS.

There is very little to report for the year 1933. It has been found that the charge of £2 15s. 0d. for the supply of dentures precludes many patients from receiving proper dental treatment. Only nine patients have been fitted with artificial teeth and probably five times that number more nearly approximates the total number of patients seen who should have them. In addition there must be many more whom the dentist never sees. They are debarred from treatment because the prospect of their being able to pay for dentures is hopeless. These people continue with diseased mouths, and one cannot but sympathise with a patient who refuses to part with her teeth when the prospect of having artificial dentures is remote, if not impossible. Without doubt many of them would be healthier without teeth at all rather than the functionless and diseased ones they possess.

The purchase of a gas and oxygen apparatus for the giving of a continuous anæsthetic would lighten the work of the dentist and rob the work of its most unpleasant aspect for the patient. Such an apparatus, though rather costly in the first instance, is an essential of any up-to-date dental surgery. The present method of a single gas induction does not give sufficient time for the work required.

Excellent results have been achieved with regional anæsthesia, but one might say that in the majority of cases so treated continuous nitrous oxide and oxygen would have been preferable. This refers only to maternity and child welfare adult patients.

280 patients in all have been seen in 1933. The number of extractions done is 631 and fillings 13. The number of scalings and cleanings, minor operations and gum treatments come to 107 and, as stated earlier, nine full dentures have been supplied.

A. G. MOXON, L.D.S.,

Senior Dental Officer.”

REPORT ON ULTRA-VIOLET LIGHT TREATMENT DURING THE YEAR 1933.

(By Dr. C. F. WALKER).

A.—LIGHT TREATMENT CENTRE.

This Department is under the same roof as the Tuberculosis Dispensary; the Clinical Tuberculosis Officer is Medical Officer of the Centre, and the X-ray Nurse of the Dispensary is also Light Treatment Nurse.

It is well known that the healing virtues of sunshine were familiar, and sun-bathing practised among the ancient Egyptians and other sun-worshippers. Latterly, by spectrum analysis it has been possible to study the different rays which make up sunlight, and it has been found that those from the ultra-violet end of the spectrum are largely responsible for the beneficial effects of sunlight. Similar rays are given out from various electric arcs, the carbon, tungsten, and mercury vapour arcs, and of these the last-named is particularly rich in ultra-violet radiation. Artificial sunlight thus produced is remarkably potent in its effects, and even dangerous unless carefully controlled. The K.B.B. Mercury Vapour Lamp is the type used for general and local treatment at the Light Treatment Centre. Its main uses may be briefly indicated as follows:—

- (a) To stimulate the skin to form vitamin D, which is apt to be lacking in young children who have not had enough fresh milk and butter, and whose smoky surroundings deprive them of sunlight. Without vitamin D in the body, the lime of the food cannot be assimilated to form healthy bones and teeth, hence rickets.
- (b) To act as a general tonic and stimulant in cases of debility and especially in cases of tuberculosis of glands and bones.
- (c) To heal skin ulcers and chronic tubercular skin condition, such as lupus, by the bactericidal and stimulating effect on the diseased tissues.

The latter type of case is often very chronic and resistant to treatment. For more intensive treatment of such cases that are not readily amenable to irradiation with the ordinary Mercury Vapour Lamp, it was decided to obtain a Kromayer Lamp, which is water-cooled and fitted with a suitable condenser device for direct application to limited areas. In applying, sufficient pressure is exerted with the application to diminish the blood-supply to the part, and the intensity of the effect is thereby increased. This Lamp was brought into use during the latter part of the year, and one patient with multiple ulcers of the soft palate, who had responded very slowly to treatment with the ordinary Mercury Vapour Lamp, noticeably improved when the Kromayer was used.

Certain adjustments of the times of the Light Treatment sessions were made during the year to enable school children to attend as far as possible in the afternoons, and on Saturdays, so as to cause the minimum of interference with school work; these adjustments have also the effect of liberating the Light Treatment Nurse for that part of her duties which comprises clerical work in connection with certain Dispensary sessions. The Light Treatment sessions number six per week, and are now arranged as follows:—

Non-tubercular Children.

General Treatment:—Monday and Friday at 2 p.m.

Tubercular Children.

General Treatment:—Wednesday at 2 p.m.

Saturday at 9 a.m.

Adults and Local Treatment.

Monday and Thursday at 10 a.m.

The general treatment procedure is that each patient attends twice weekly, and is irradiated at a distance of three feet from the Lamp, the front or back of the body and limbs being exposed at alternate sessions. Exposures start with a test irradiation of one minute to the extremities only, which is doubled at the next session. Thereafter the trunk is also exposed, for periods increased by one minute each time up to a maximum of ten minutes, or until a fine branny desquamation is noted with a less exposure.

In the case of red-haired children, the maximum time of exposure is five minutes, in fair-haired, seven minutes. The transparent pink and white type of complexion implies lack of protective pigment granules in the skin, and such people are unduly sensitive to the ultra-violet rays. Symptoms indicating a reduction in dosage are: drowsiness or headache after treatment, possibly slight temperature, also tiredness and loss of weight and appetite. Favourable progress is indicated by improvement in weight, colour and appetite, while immediately after treatment there should be a marked feeling of energy and well-being—parents sometimes even complain that the child is impossible to control on the way home—attempts to climb walls, trees, etc., and dashes madly about.

Exposure should not be pushed to the point of causing marked reddening of the skin, followed by peeling. In the case of tubercular patients such a practice would be likely to aggravate the disease; over-dosage with ultra-violet radiation produces similar effects to an over-dose of tuberculin.

The work of the Light Treatment Centre increased during the year, 97 patients being under treatment on the 31st December, 1933, as compared with 63 at the beginning of the year. Altogether 214 patients received 6,354 treatments—a marked increase over the 1932 figures. Out of 86 discharged, 74 definitely improved, and 12 had not improved. 31 patients failed to continue.

The results of treatment are shown in the accompanying Tables.

(1) Treatment of School Children.

Full statistical details and full comments on the work done under this section are given in the current Annual Report of the School Medical Officer, pages 33 to 34.

(2) Treatment of Children under School Age.

Perhaps the most interesting class in this group consists of the children suffering from Rickets, of whom 22 received treatment, as against 9 only in the previous year. This increase is due to the interest taken by the Medical Officer of Health and the Medical Officers of the Maternity and Child Welfare Centres, who have taken much trouble to send as many cases as possible. It has been most striking to

watch the steady improvement in these children. In active rickets, there is not only delay and defective development of bones and teeth, owing to the child's inability to assimilate the necessary lime from the food, caused by lack of vitamin D; there is also general impairment of health, pallor, stomach-ache, diarrhoea and general weakness, with disinclination to try to walk; if the child is walking there is abnormal curvature of the leg bones. All these symptoms are due to lack of enough fresh milk and butter, coupled with inadequate sunshine. Treatment with ultra-violet light, by forming the necessary vitamin D in the skin, when supplemented by suitable diet, causes rapid improvement in the general health and vigour, while the teeth and bones undergo steady growth and development. These results are a striking testimony to the value of ultra-violet light treatment in Rickets.

Another large class of young children consisted of 27 classified as "Debility": these included many "per-tubercular" contacts in poor health, some probably suffering from a latent glandular infection, not yet diagnosed, and, therefore, labelled "observation cases." The majority of these definitely improved under treatment, but the results are somewhat obscured in the table (and this applies also to the Rickets class) by the relatively large number of improving cases who "failed to continue." The cause of this, when it occurs, is rarely failure to appreciate the treatment, usually it means that the mother is unable to bring the child as she is not able to leave home, either on account of her own health, or illness of the patient, or some other member of the family; or it may even transpire that they are too poor to afford the double bus fare from some distant suburb. Some of these mothers have a hard struggle with poverty and home worries, and find it a great effort to bring the little patient regularly; often they have to bring other children lest something should befall them, while the mother is away; no wonder some of them abandon the unequal struggle!

(3) Treatment of Adults.

The most interesting group consisted of 11 Lupus cases who received 466 treatments—all very chronic, obstinate cases, who had been under treatment for years. Most of these cases showed greater signs of improvement than in previous years, as a result of combining general with intensive local treatment. The local exposures were increased up to the maximum that the patient could tolerate, as strong re-actions have been found to give the best results.

In some cases exposures were increased up to half an hour at 10 inches once per week. Some of the more obstinate cases, where excessive thickening of the tissues interfered with efficient radiation, required repeated dressings of "Brass Paste" or "lio-nitrobro," which by selective caustic action render the lesion more amenable to the action of the Lamp. Towards the end of the year, the new water-cooled Kromayer Lamp was brought into use in three cases, where the lesions were reasonably suitable, but the time has been too short to judge of the results as yet. A small group of three adult cases of Tb. glands had 53 treatments, and two were discharged definitely improved.

General.

The results above described are very encouraging, and would justify extending the scope of the Centre by the provision of a Carbon Arc Lamp for general treatment, whereby larger numbers of children could be treated than at present. The treatment room has been enormously improved and quietness assured by the construction, during the year, of a sound proof partition between this room and the unemployed recreation room, which is in the same building.

TABLE 53.
ULTRA VIOLET LIGHT TREATMENT CENTRE, QUEEN'S ROAD.
CHILDREN UNDER SCHOOL AGE.

Suffering from	Cases on Books 31/12/32.	New Cases, 1933.	Total Cases Treated.	Total Treat- ments.	Discharged.		Failed to continue.	Still under Treatment 31/12/33.
					Im- proved.	Not Im- proved.		
Debility	8	19	27	623	4	2	8	13
Rickets and Rickets Deformity	5	17	22	669	5	1	7	9
Adenitis (Non T.B.) ... ..	...	2	2	83	2	...	...	...
Dermatitis etc.	1	...	1	88	1	...	...	...
Alopecia ... ..	...	1	1	12	...	...	...	1
T.B. Joints—N.P. 1	1	...	1	60	...	...	...	1
T.B. Abdomen—N.P. 2	1	4	5	33	...	1	1	3
T.B. Adenitis—N.P. 4 ... ..	...	1	1	36	1	...	...	...
Totals	16	44	60	1604	13	4	16	27

TABLE 54.
ULTRA VIOLET LIGHT TREATMENT CENTRE, QUEEN'S ROAD.
ADULTS. NON-TUBERCULAR PATIENTS.

Suffering from	Cases on Books 31/12/32.	New Cases, 1933.	Total Cases Treated.	Total Treatments.	Discharged.		Failed to continue.	Still under Treatment 31/12/33.
					Im-proved.	Not Im-proved.		
Debility ...	...	1	1	7	...	...	1	...
Rheumatism ...	...	1	1	31	...	...	...	1
Varicose Ulcer ...	1	...	1	21	1	...	...	...
Totals ...	1	2	3	59	1	...	1	1

TABLE 55.
ULTRA VIOLET LIGHT TREATMENT CENTRE, QUEEN'S ROAD.
ADULTS. TUBERCULOUS PATIENTS.

Suffering from	Cases on Books 31/12/32.	New Cases, 1933.	Total Cases Treated.	Total Treatments.	Discharged.		Failed to continue.	Still under Treatment 31/12/33.
					Im-proved.	Not Im-proved.		
Lupus N.P. 3 ...	7	4	11	466	2	...	1	8
Adenitis N.P. 4 ...	...	3	3	53	2	...	...	1
Totals ...	7	7	14	519	4	...	1	9

TABLE 56.
ULTRA VIOLET LIGHT TREATMENT CENTRE, QUEEN'S ROAD.
SUMMARY OF ALL LIGHT TREATMENT CASES.

				Cases on Books, 31/12/32.	New Cases	Total Cases Treated.	Total Treat- ments.	Discharged.		Failed to continue	Under Treat- ment 31/12/33
								Im- proved.	Not Im- proved.		
Table 53.											
Children under School Age	...	...	...	16	44	60	1604	13	4	16	27
Table 55.											
Adults (Tubercular)	...	...	...	7	7	14	519	4	...	1	9
Table 54.											
Adults (Non-Tubercular)	...	...	...	1	2	3	59	1	...	1	1
Grand Totals ...	...	...	...	23	53	77	2182	18	4	18	37

The following is the report of Dr. C. F. Walker on the work of the Tuberculosis Dispensary and Mount Vernon Sanatorium:—

B.—TUBERCULOSIS DISPENSARY.

It is of vital importance that as many suspected cases as possible should be dealt with at the Dispensary. In this respect I have received valuable help from the general practitioners of the Borough and from my colleagues of the Public Health Staff. The large number of consultations, personal and otherwise speaks for itself. Nevertheless, the early symptoms of the disease are so baffling and the delay in seeking medical advice so general, that far too many cases are already severely affected when they first come under observation. It cannot be over-emphasized that, if patients would only seek medical advice when symptoms of ill-health first arise, the prospects of complete recovery would be greatly enhanced.

The reason for late notification, and for patients delaying their application until in an advanced stage of the disease, is chiefly the disinclination of patients to call in the doctor when they first begin to ail. This is due mainly to the insidious onset of the disease, the patient thinking he is only slightly 'run down.'

There does not appear to be evidence of any unreasonable delay on the part of private practitioners in referring cases to the Tuberculosis Officer. One appreciates that this is a matter requiring tact and knowledge of the patient, as many people are upset and even annoyed when medically advised that there is a suspicion of tuberculosis. The initiative in seeking treatment, when ill, must rest with the patient himself, and there are signs that the general public is gradually becoming educated as to symptoms and dangers of tuberculosis and the need for prompt treatment.

The number of consultations between the Clinical Tuberculosis Officer and general practitioners during the year was 547, of which 138 were personal consultations. The number of specimens of sputum examined at the Sheffield University Laboratory in respect of Dispensary patients was 230, with 44 positive results, in addition to 73 sent by general practitioners in suspected cases, 14 being positive for Tuberculosis. In

doubtful cases, the examination of the sputum is repeated, it may be several times, and the patient is kept under observation for a period in order that the clinical signs, temperature, etc., may be kept under review. All new patients are X-rayed as a routine and, if necessary, a second X-ray film is taken after an interval in order to reveal whether any latent focus is developing.

It is probable that in most cases childhood is the period when infection takes place, and that the acute pulmonary tuberculosis of adolescents, and the chronic disease typical of later adult life, have resulted from the spread of a childhood infection. The usual site of invasion in children is the lymphatic system, the bacilli lodging in the glands, which act as filters in dealing with the products of digestion. The symptoms of the disease—tiredness, want of appetite, occasional stomach pain or diarrhoea, are of an indefinite character, and hence the child may be thought to have “bilious attacks,” or to be suffering from “gastritis,” and the true nature of the trouble may be quite unsuspected. Hence delay in seeking medical attention. This type of disease usually tends slowly towards recovery, but may become active again in later life owing to the health being lowered from any cause, e.g., prolonged worry, over-fatigue, and under nourishment. The obvious conclusions are, first, that children should be protected against sources of tuberculous infection, and, secondly, when infection is found to have taken place, every effort should be made to raise and maintain the child’s health at the highest possible level, so that the arrest of the disease may be effected.

During 1933, the number of new cases of non-pulmonary tuberculosis among children diagnosed at the Dispensary was 66, as against 49 in 1932. I attribute this increase to a greater alertness for early symptoms and signs, among the doctors who send cases to me for consultation, resulting in a larger percentage of definite cases among those dealt with. In this connection, it may be noted that out of 55 children referred to me in 1933 by the Medical Officers of the school and Maternity and Child Welfare Clinics, 29 were found to be tubercular, as compared with 19 out of 53 in the previous year. This is but one instance of the valuable co-operation which exists between the Tuberculosis Dispensary and the other Departments under the control of the Medical Officer of Health.

(F) Return showing the results of observation of doubtfully tuberculous cases discharged during the year from Institutions approved for the treatment of Tuberculosis.

Diagnosis on discharge from Observation.	For Pulmonary Tuberculosis						For Non-Pulmonary Tuberculosis.						Totals.		
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous ...	1	...	...	1	...	...	...	...	...	...	...	...	2	...	...
Non-Tuberculous ...	...	...	1	2	1	1	...	...	...	1	...	1	3	1	3
Doubtful ...	1	...	...	...	...	...	...	...	...	...	...	1	1	...	1
Totals ...	2	...	1	3	1	1	...	...	...	1	...	2	6	1	4

(G) Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

Classification on admission to the Institution.	Condition at time of Discharge.	Duration of Residential Treatment in the Institution.												Grand Totals.				
		Under 3 months			3-6 months.			6-12 months.			More than 12 months				Totals.			
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.					
Pulmonary Tuberculosis.	Class T.B. Minus	Quiescent ...	2	4	3	3	2	2	3	1	3	...	...	...	7	8	23
		Not Quiescent ...	3	4	...	1	...	...	...	...	...	...	...	...	4	1	9
		Died in Institution	...	1	...	...	...	...	1	...	...	...	...	...	1	...	2
			
	Class T.B. plus Group 1	Quiescent ...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Not Quiescent ...		...	...	...	...	...	...	1	...	...	...	...	...	3	2	5	
Died in Institution		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
			
Class T.B. plus Group 2	Quiescent ...	...	...	...	2	...	...	...	...	...	...	1	...	3	...	3	
	Not Quiescent ...	...	...	...	2	1	...	2	2	...	...	1	...	7	4	11	
	Died in Institution	...	...	...	...	1	...	...	...	...	...	...	...	1	2	3	
			
Class T.B. plus Group 3	Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Not Quiescent ...	...	...	...	...	1	...	...	...	1	...	...	1	2	6	8	
	Died in Institution	...	...	...	2	...	...	1	1	...	...	...	...	7	3	11	
			
TOTALS (Pulmonary)		...	13	17	3	12	5	2	9	6	4	3	1	1	37	29	10	76
Non-Pulmonary Tuberculosis.	Bones and Joints	Quiescent ...	...	...	...	...	1	1	...	...	...	...	...	2	1	6	7
		Not Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		Died in Institution	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
			
	Abdominal	Quiescent	1	8	1	10	10	10
Not Quiescent ...		...	...	1	...	...	...	...	...	...	...	...	...	...	1	1	1
Died in Institution		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		
Other Organs.	Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Not Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Died in Institution	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		
Peripheral Glands.	Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Not Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Died in Institution	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		
TOTALS (Non-Pulmonary)		...	...	2	...	1	9	...	...	...	4	...	...	2	1	17	18

TABLE 59.

TUBERCULOSIS SCHEME of the Barnsley County Borough Council.

PULMONARY TUBERCULOSIS,

Supplementary Annual Return showing in summary form (a) the condition at the end of 1933 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of pulmonary tuberculosis, and their classification at that time.

Condition at the time of the last record made during the year to which the Return relates.					1930 and previous.					1931.					1932.					1933.						
					Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.					
						Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		
(a) Remaining on Dispensary Register on 31st December.	Disease arrested.	Adults.	M.	24	..	2	..	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
			F.	10	1	4	..	5	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		Chil-dren.		25	.	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
			Adults.	M.	4	6	8	2	16	3	1	1	..	2	13	1	8	1	10	11	1	9	1	11	11	
				F.	7	2	5	2	9	7	2	2	..	4	5	4	5	..	9	14	2	12	2	16	16	
	Disease not arrested.	Chil-dren.		21	2	..	..	2	6	..	..	..	..	15	..	..	..	..	3	..	..	..	..	..	..
			CONDITION NOT ASCERTAINED DURING THE YEAR..				5	1	3	..	4	2	3	1	..	4	2	..	..	..	..	..	..	..
			TOTAL ON DISPENSARY REGISTER AT 31st DECEMBER				96	12	22	4	38	27	6	4	..	10	35	5	13	1	19	28	3	21	3	27
		(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered.	Adults.	M.	15	3	1	..	4
					F.	10
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER	Chil-dren.				10	1	.	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
						115	3	4	..	7	11	1	..	1	2	9	..	2	..	2	3	1	1
			DEAD.	Adults.	M.	5	3	18	4	25	3	2	3	10	15	3	2	6	4	12	2	1	1	5	7	7
F.	3	2			14	4	20	2	2	4	8	14	2	1	4	5	10	1	..	1	1	2	2	2		
					Chil-dren.		1	..	..	..	..	1	..	..	..	..	1	1	..	..	..	..	..	..
TOTAL WRITTEN OFF DISPENSARY REGISTER						159	12	37	8	57	17	5	7	19	31	14	3	12	10	25	6	2	2	6	10	
GRAND TOTALS					255	24	59	12	95	44	11	11	19	41	49	8	25	11	44	34	5	23	9	37		

TABLE 59 (continued).

NON-PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the condition at the end of 1933 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register.

Condition at the time of the last record made during the year to which the Return relates.						1930 and previous.					1931.					1932.					1933.				
						Bones and Joints.	Abdominal.	Other Organs	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.
(a) Remaining on Dispensary Register on 31st December.	Disease arrested.	Chil. dren.	Adults.	M.	1	..	2	..	3	..	1	..	1	2	..	..	..	..	..	..	..	..
				F.	2	2	..	3	7	..	..	..	..	..	..	..	..	..	..	..	..	..	..
					4	10	2	2	18	..	2	1	2	5	..	..	..	1	1	1	..	..	..	1
	Disease not arrested.	Chil. dren.	Adults.	M.	1	..	2	..	3	1	..	..	..	1	..	..	..	..	..	..	3	1	4	
				F.	1	..	..	2	3	..	2	1	1	4	2	..	..	2	4	1	2	..	..	3
					1	21	4	..	26	3	15	..	1	19	4	36	2	3	45	7	56	..	2	65	
	CONDITION NOT ASCERTAINED DURING THE YEAR..					..	..	..	..	..	..	1	..	..	1	1	1	..	..	2	..	..	..	..
	TOTAL ON DISPENSARY REGISTER AT 31ST DECEMBER ..					10	33	10	7	60	4	21	2	5	32	7	37	2	6	52	9	58	3	3	73
	TRANSFERRED TO PULMONARY ..					..	..	..	1	1	..	1	..	..	1	..	..	..	..	..	..	..	..	..
	(b) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered.	Chil. dren.	Adults.	M.	1	..	1	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..
F.					..	1	2	3	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
					9	11	1	18	39	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER ..					7	9	2	17	35	3	..	2	3	8	2	2	2	1	7	1	1	..	..	2
DEAD.		Chil. dren.	Adults.	M.	1	..	..	..	1	..	..	1	..	1	..	..	..	..	..	..	..	..	..
				F.	..	..	1	..	1	..	..	..	..	..	..	1	..	1	..	..	1	..	..	1
					2	3	..	..	5	..	..	2	..	2	..	1	2	..	3	..	..	..	..	..
TOTAL WRITTEN OFF DISPENSARY REGISTER ..					20	24	7	38	89	3	..	5	3	11	2	3	5	1	11	1	1	1	..	3	
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary) ..					30	57	17	45	149	7	21	7	8	43	9	40	7	7	63	10	59	4	3	76	

TABLE 60.

TUBERCULOSIS.

New Cases and Deaths.

CLASSIFIED INTO AGE GROUPS.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 years	...	...	3	3	...	..	2	...
1—5 ...	1	...	6	2	...	...	2	2
5—10 ...	11	2	18	17	...	...	2	2
10—15 ...	4	3	15	10	...	1	...	...
15—20 ...	6	4	...	...	3	...	...	...
20—25 ...	3	10	...	2	8	3	...	1
25—35 ..	11	14	2	2	11	7	...	...
35—45 ...	13	6	1	...	6	6	...	...
45—55 ...	8	3	...	2	12	1	...	1
55—65 ..	1	1	1	1	3	...	...	...
65 and upwards	...	...	1	...	2	...	...	...
Totals ...	58	43	47	39	40	18	6	6

TABLE 61.
TUBERCULOSIS—NOTIFICATIONS AND DEATHS
For 12 Years.

Year.	Pulmonary.			Other Forms of Tuberculosis.			Total Tuberculosis Death Rate.
	Notified	Died.	Death Rate per 1000 living.	Notified.	Died.	Death Rate per 1000 living.	
1922	227	59	0·85	35	24	0·34	1·19
1923	109	64	0·91	45	20	0·29	1·20
1924	115	67	0·95	25	13	0·18	1·13
1925	119	54	0·76	45	19	0·27	1·03
1926	78	57	0·81	35	11	0·16	0·96
1927	143	48	0·65	79	16	0·22	0·87
1928	123	48	0·67	58	14	0·19	0·86
1929	190	56	0·79	89	22	0·30	1·09
1930	118	46	0·64	58	13	0·18	0·82
1931	98	44	0·60	67	23	0·32	0·92
1932	110	51	0·70	75	14	0·19	0·90
1933	101	58	0·81	86	12	0·16	0·97

TABLE 62.

TUBERCULOSIS—PERIODS BETWEEN NOTIFICATION
AND DEATH.

8 cases died within 1 week of notification.				
5	”	”	2 weeks	”
2	”	”	1 month	”
2	”	”	2 months	”
3	”	”	3 months	”
7	”	”	6 months	”
8	”	”	1 year	”
10	”	”	2 years	”
8	”	”	3 years	”
5	”	”	4 years	”
1	”	”	5 years	”
1	”	”	6 years	”
1	”	”	8 years	”
1	”	”	12 years	”
1 case was notified after death.				
7 cases were not notified.				

Total 70

VENEREAL DISEASES.

The Venereal Disease Scheme remained throughout the year as set out in the Report for 1930.

MENTAL DEFICIENCY.

The following Tables show the present position of ascertainment and disposal in the County Borough at the end of the year 1933.

TABLE 64.

PARTICULARS OF MENTAL DEFECTIVES AS ON 1st JANUARY, 1934.

(A) "Subject to be dealt with" by the Local Authority;

(B) Who may become "subject to be dealt with" by the Local Authority.

A. Number of Cases "Subject to be dealt with":—

Males Females Total

1 Under "Order":—

(a) (1) In Institutions
(excluding cases on
Licence)

Under 16 years of age

4 3 7

Aged 16 years and over

— 17 17

(2) On Licence from
Institutions

.....

(b) (1) Under Guardianship
(excluding cases on
Licence)

.....

(2) On Licence from
Guardianship

.....

2 In "Places of Safety"

Under 16 years of age

1 — 1

Aged 16 years and over

3 2 5

3 Under Statutory Supervision
Of whom, awaiting removal
to an Institution

27 40 67

.....

4 Action not yet taken under any one of the above head- ings:—

(a) Notified by Local Educa-
tion Authorities (Sec. 2. (2)

.....

(b) Mental Defectives in

receipt of Poor Relief:—

(1) Institutional	.....	8	5	13
(2) Domiciliary	.....	3	5	8
(c) Otherwise "ascertained"		2	4	6

B. Number of Cases who may become "Subject to be dealt with":—

1 In Institutions or under Guardianship—dealt with under Section 3:—

(a) In regard to whom the Local Authority contributes under its permissive powers

.....

(b) Maintained wholly by parents, relatives, or others

.....

2 Reported to the Local Authority from any reliable source but as to whom no action has been taken

5 13 18

3 Under Voluntary Supervision

20 19 39

DURING THE YEAR 1933.

1. (a) Number of instances in which Licence was granted during 1933:—

Males Females Total

(1) From Institutions

.....

(2) From Guardianship

.....

(b) Number of instances in which cases on Licence have been returned to Institutions or transferred to Guardianship during the year 1933:—

(1) To Institutions

.....

(2) To Guardianship

.....

2. Cases notified by Local Education Authorities [Section 2 (2)] during the year 1933:—

Method of disposal—

Males Females Total

Sent to Institutions (by Order)

— 1 1

Placed under Guardianship (by Order) .....	.....	.....	.....
Placed under Statutory Supervision	4	10	14
Placed in "Places of Safety"	—	1	1
Died or Removed from Area .....	.....	.....	.....
Action not yet taken—			
(a) In receipt of Poor Relief .....	.....	.....	.....
(b) Others .....	.....	.....	.....
Total	4	12	16

3. Of the total number of mental defectives known to the Local Authority—

(a) Number who have given birth to children during 1933:—

(1) After marriage Nil

(2) While unmarried 1

(b) Number who have married during 1933 M. F.
Nil 1

TABLE 65.

STATEMENT OF MENTAL DEFECTIVES KNOWN TO THE LOCAL AUTHORITY ON 31st DECEMBER, 1933.

	Males	Females	Total
(1) Total Number of Defectives known to Local Education Authority (i.e., not notified to Local Mental Deficiency Committee):—			
(a) Feeble-minded	76	83	159
(b) Imbeciles	—	—	—
(c) Idiots	—	—	—
(2) Methods of Treatment of:—			
(1) (a) (i.) Ordinary Class at School	25	20	45
(ii.) Dull or Backward Class....	32	34	66
(iii.) Special Residential Schools	1	1	2
(iv.) Excluded from Schools	8	10	18
(v.) Between the age of 14 and 16 years under supervision at home	11	17	28
(1) (b) (i.) Ordinary Class at School	—	—	—
(ii.) Dull and Backward Class	—	—	—
(iii.) Special Residential Schools	—	—	—
(iv.) Excluded from Schools	—	—	—
(v.) Between the age of 14 and 16 years under home supervision	—	—	—

(3) Number of Defectives known to Local Mental Deficiency Authority:—

	Adults.			Children under 16yrs.		
	M.	F.	Total.	M.	F.	Total.
(a) Feeble-minded ...	6	16	22	...	3	3
(b) Imbeciles ...	9	10	19	9	7	16
(c) Idiots		2	2	3	2	5

(4) Number of these included in (1) above Nil

(5) Method of treatment of (3) (a), (b), and (c):—

	Feeble-minded		Imbeciles		Idiots		TOTAL		Grand Total
	M	F.	M.	F.	M.	F.	M.	F.	
(i) Ordinary class ..	...	...	...	..	...	...	...	...
(ii) Dull and Backward class	...	...	...	..	...	...	...	...
(iii) Special Residential Schools	...	...	...	...	...	...	...	...
(iv) Excluded from Schools	...	3	9	7	3	2	12	12	24
(v) Residential Institutions :—									
(a) S. Catherine's	...	9	1	8	3	2	19	4	23
(b) Other :—									
Stoke Park Colony	...	...	...	1	...	...	...	1	1
Rampton State	...	1	...	1	...	...	1	1	2
Storthes Hall	...	...	...	...	1	...	1	...	1
Municipal Institution...	2	2	1	...	1	...	4	2	6
(6) No. of cases otherwise ascertained but no action taken :—									
In Municipal Institution	4	4	3	1	1	...	8	5	13
Under supervision at Home	25	32	...	...	...	...	25	32	57
(7) Number of Defectives notified in :—									
1929	...	3	1	2	1	2	7	2	9
1930	2	7	4	...	...	2	8	7	15
1931	4	11	2	...	2	1	8	12	20
1932	1	2	2	...	2	...	5	2	7
1933	1	8	2	4	1	...	4	12	16

BLIND PERSONS ACT, 1920.**STAFF.**

J. A. SCOTT, M.D., D.P.H.,
Superintendent and Medical Officer of Health

R. R. Hanlon,
Assistant Superintendent.

Miss Mary Jackson (resigned 11th February, 1933).

Miss D. G. L. Hall (commenced 13th February, 1933).

Mrs. C. Womersley,

Certified Home Teachers and Blind Visitors (whole-time).

Miss L. Parker,

Home Teacher. Uncertified (part-time).

Miss Hall and Mrs. Womersley are sighted persons, but
Miss L. Parker is blind.

It will be noted that Miss Mary Jackson, who had many years of loyal and efficient service, both with the Old Voluntary Association and with the Corporation, has retired from her position as Blind Visitor. The work done by Miss Jackson in the West Riding area has made her a host of friends and the good wishes, both of the staff and the blind of the district, go with her in her retirement.

PREMISES.

The premises (generally known as "The Blind Welfare Centre") are situated in Market Street, and consist of:—

- (1) A Workshop where blind employees both from the County Borough of Barnsley and the West Riding area are employed.
- (2) A small Office.
- (3) A large Dining or Recreation Room.
- (4) A Shop in two sections where the products of the blind workers are exhibited for sale.
- (5) A small back room on the ground floor, fitted for use as a boot-repairing workshop, and containing the central heating stove.

Owing to lack of room, the large Dubied Flat Knitting Machine and the small Harrison Flat Knitting Machine are installed in the Recreation Room.

In their present form, the premises generally are out-of-date and inconvenient for the purposes of an expanding Blind Welfare Centre, especially in view of the number of trainees whose course of training is nearing completion and for whom in the near future accommodation must be provided in the Workshop.

A scheme for a new Blind Welfare Centre on a site in the New Street Cleared Area was, this year, submitted to the Ministry of Health, but was not approved in the form submitted. A further and modified scheme is suggested and will be prepared and submitted to the Ministry in due course.

HOME WORKERS.

In the County Borough there is one male Homeworker employed as a Newsvendor. His earnings are augmented by £1 per week.

NECESSITOUS, ETC., BLIND.

The Corporation augments the income of any necessitous unemployable blind person who has had over one year's continuous residence in the Borough, so that in the case of householders the total income will amount to 27/6 per week and in the case of non-householders, to 20/- per week.

At the 31st December, 1933, 75 blind persons were in receipt of this form of assistance, viz:—

Householders	.....	.....	.....	29 males
„	.....	.....	.....	11 females
Non-Householders	.....	.....	.....	12 males
„	.....	.....	.....	23 females
Total				75

Compared with the 31st December, 1932, there is an increase of 25 persons in receipt of this form of assistance.

REGISTERED BLIND.

There are two blind persons in the County Borough younger than 12 years of age, viz:—a girl who will be three years of age in July, 1934, and a boy who will be ten years of age in January, 1934.

The ages of the three youngest cases are:—
2, 9, 13 years.

Two of these children are being educated at Blind Schools.

Two male adults and one female adult are in vocational training at Blind Technical Training Schools. The number of registered blind persons in the County Borough in the care of the Department on the 31st December, 1933, was 117 (an increase of 25 persons compared with the corresponding period last year) and are in the following age-groups:—

	Males	Females	Total
Under 5 years	—	1 (1.79%)	1 (0.85%)
5—15 years	2 (3.28%)	—	2 (1.80%)
16—21 years	2 (3.28%)	6 (10.71%)	8 (6.84%)
22—30 years	1 (1.64%)	2 (3.57%)	3 (2.56%)
31—50 years	13 (21.31%)	13 (23.21%)	26 (22.22%)
51—70 years	27 (44.26%)	19 (33.93%)	46 (39.23%)
Over 70 years	16 (26.23%)	15 (26.79%)	31 (26.50%)
	<hr/> 61 <hr/>	<hr/> 56 <hr/>	<hr/> 117 <hr/>

Of the total 117 blind persons, 52.13% are males and 47.87% females.

The oldest persons in the above groups—one male and one female—have reached the age of 90 years and 93 years respectively.

In 1933, there have been five deaths, 28 new cases, and 2 removals into the County Borough.

The blind persons on the Register at the 31st December, 1933, are divided into the following categories:—

	Males	Females	Total
Unemployable	51 (83.64 %)	49 (87.50 %)	100 (85.48 %)
Employable	1 (1.63 %)	—	1 (0.85 %)
Employed	5 (8.19 %)	5 (8.92 %)	10 (8.55 %)
At School	2 (3.27 %)	—	2 (1.70 %)
In Training	2 (3.27 %)	1 (1.79 %)	3 (2.57 %)
Pre-School	—	1 (1.79 %)	1 (0.85 %)
	<hr/> 61	<hr/> 56	<hr/> 117

The occupations of the employed and employable blind persons resident in the County Borough are:—

- 1 Solicitor.
- 4 Homeworkers.
- 1 Home Teacher.
- 2 Blind Organizers.
- 1 Match Seller.
- 1 Boot and Shoe Repairer.
- 1 Newsvendor.

HOME VISITS.

During the year ended 31st December, 1933, the Home Teachers and Blind Visitors made the following visits in the County Borough Area:—

Miss Jackson (retired 11th February, 1933)	62
Miss Hall (commenced 13th February, 1933)	199
Mrs. Womersley	918
Miss Parker	250

Mr. Hanlon, the Assistant Superintendent, also made several special visits.

Miss Parker has given lessons in Braille to three blind persons.

On the retirement of Miss Jackson, an adjustment of visiting in the Borough and West Riding areas was made as between Miss Hall and Mrs. Womersley.

MAGAZINE READING CIRCLE.

Interesting and instructive Braille publications supplied by the Department are regularly circulated amongst blind readers. Several are members of the National Library for the Blind, Northern Branch, Manchester, whence they obtain a varied range of Braille literature. A special low rate of postage is available for such literature. The Braille section of the County Borough Free Library is also freely used by both County Borough and West Riding area readers and the facilities afforded are much appreciated.

WORKSHOP.

In the Workshops are employed four female blind workers all resident in the County Borough. They are engaged on round and flat knitting machines, making stockings, socks, underwear, wollen scarves, also re-footing stockings and socks. They are also engaged in rush and cane chair seating and when orders are available make cardigans, boys' suits, wool rugs and wool mats. When possible, developments in flat knitting machine goods will be undertaken. All articles made are excellently manufactured and equal any sighted production, the best materials only being used, under careful supervision of a qualified instructress and supervisor.

The Department supplies all materials for goods manufactured and offers them for sale in the Department Sales Shop. The wages earned by approved Workshop Employees are augmented by £1 per week. One West Riding worker removed into the County Borough during the year. The special limitations of the present premises have already been referred to in this and prior reports.

SALES SHOP.

It is gratifying to report a further increase in sales to the general public as compared with 1932. As trade generally improves and spending power becomes greater further increased turnover is anticipated and will be welcomed as the greater our sales the more will be the output of our Workshop employees and increase in their earnings. To be fully employed is the ambition of our blind workers. Every purchase made helps to keep them working and to increase the brightness and usefulness of their lives. The trade given by some of the Corporation Departments is greatly appreciated and it is hoped that orders for

baskets, mats and brushes of any description from this source will increase still further. This year the demand for basket work has been exceptional, especially shopping baskets which are marketed in qualities and designs to suit all tastes and pockets. A greater demand for our knitted goods and for the re-caning of chairs would be much welcomed. The department collects chairs from any part of the County Borough and returns them, when completed. A post card addressed to the Department, 24a Market Street, Barnsley, will ensure prompt attention to the collection of chairs, etc., for re-caning.

NORTHERN COUNTIES ASSOCIATION FOR THE BLIND AND NATIONAL INSTITUTE FOR THE BLIND.

The Corporation is affiliated to these Blind Organizations. Their experience and special knowledge of blind welfare is at the disposal of the Department and is found to be of practical assistance in many ways.

WEST RIDING COUNTY COUNCIL AREA.

By arrangement with the County Council, the County Borough administers Blind Services in the following County districts:—

Blacker Hill, Barugh Green, Barugh, Brampton, Birdwell, Chapeltown, Carlton, Cudworth, Darfield, Darton, Dodworth, Elsecar, Gawber, Gilroyd, Hoyland, Hoyland Common, Hemingfield, High Green, Jump, Kexborough, Low Valley, Mapplewell, Platts Common, Pilley, Royston, Staincross, Silkstone, Thurnscoe, Upper Hoyland, Wombwell, Ward Green, Worsborough Bridge and Worsborough Dale.

Above are the districts in which the blind persons on the West Riding area Register at the 31st December, 1933, reside. The actual area administered by the County Borough for the County Council covers approximately seven miles round the County Borough.

WORKSHOP EMPLOYEES.

At the 31st December, 1933, there were no West Riding employees in the Workshop. Two Trainees are, however, expected to be approved for admission when their training is completed in July, 1934.

HOME WORKERS.

In the West Riding Area there are six Homeworkers engaged as follows:—

- 1 Basketmaker and Repairer and Chair Seater.
- 3 Piano Tuners and Repairers.
- 2 Boot and Shoe Repairers.

It is anticipated that a Trainee who has completed his training as a boot and shoe repairer will be approved as a Homeworker in 1934.

NECESSITOUS UNEMPLOYABLE BLIND.

The necessitous unemployable blind persons in the West Riding area are looked after by the Public Assistance Department of that Authority.

REGISTERED BLIND.

The youngest blind persons in the West Riding area administered by the County Borough are a boy and a girl, who will be four years of age in May and September, 1934, respectively. The ages of the eleven youngest blind persons are as follows:—

Males 3, 10, 11, 13, 13.

Females 3, 5, 8, 11, 13, 14.

Ten of these children (five males and five females) are being educated at Blind Schools.

The number of registered blind persons in this area on the 31st December, 1933, in the care of the Department was 154 (an increase of 23 persons compared with 31st December, 1932). They are in the following age-groups:—

	Males	Females	Total
Under 5 years	1 (1.40%)	1 (1.21%)	2 (1.30%)
5—15 years	4 (5.64%)	5 (6.03%)	9 (5.85%)
16—21 years	4 (5.64%)	4 (4.81%)	8 (5.19%)
22—30 years	6 (8.45%)	4 (4.81%)	10 (6.49%)
31—50 years	13 (18.31%)	16 (19.28%)	29 (18.83%)
51—70 years	30 (42.26%)	36 (43.37%)	66 (42.86%)
Over 70 years	13 (18.30%)	17 (20.49%)	30 (19.48%)
	<hr/> 71 <hr/>	<hr/> 83 <hr/>	<hr/> 154 <hr/>

Of the total 154 blind persons, 46.10% are males, and 53.90% are females.

The oldest blind persons in these groups, viz., one male and one female, have reached the age of 88 and 87 years respectively.

In 1933, there have been 9 deaths, 32 new cases, 1 removal from another area, and 2 removals to other areas.

Three males and three females over 16 years of age are undergoing vocational training at Blind Technical Training Schools.

The blind persons on the register at 31st December, 1933, are divided into the following categories:—

	Males	Females	Total
Unemployable	52 (73.24%)	71 (85.54%)	123 (79.87%)
Employed	11 (15.49%)	2 (2.41%)	13 (8.44%)
Pre-School	1 (1.41%)	1 (1.20%)	2 (1.30%)
At School	4 (5.63%)	6 (7.23%)	10 (6.49%)
In Training	3 (4.23%)	3 (3.62%)	6 (3.90%)
	<hr/> 71	<hr/> 83	<hr/> 154

The occupations of the employed blind persons resident in the West Riding area are:—

- 1 Basket Maker, atc.
- 2 Boot Repairers.
- 1 Typist.
- 1 Shopkeeper.
- 2 Poultry Farmers.
- 3 Piano Tuners.
- 3 Miscellaneous.

HOME VISITS.

During the year 1933, the Home Teachers and Blind Visitors made visits as follows in the West Riding area:—

Miss Jackson (retired 11th February, 1933)	153
Miss Hall (commenced 13th February, 1933)	1,158
Mrs. Womersley	117
Miss Parker	169

Mr. Hanlon, the Assistant Superintendent, also made several special visits.

Miss Parker has given lessons in Braille to five persons.

BARNESLEY AND DISTRICT JOINT BLIND WELFARE COMMITTEE (ACTING IN CONJUNCTION WITH THE NATIONAL INSTITUTE FOR THE BLIND).

The constitution of this Committee and its objects are detailed in the report for the year 1932.

The Town Clerk is the Honorary Secretary and the Borough Treasurer is the Honorary Treasurer. The meetings are held in the Town Hall.

Under the auspices of this Committee, on the 4th January, 1933, a tea and concert was provided for the registered blind persons cared for by the Blind Welfare Department and constituted a happy and very enjoyable re-union. To ensure safety and comfort, each blind person was allowed to bring a relative or friend as a guide. The gathering took place at the Co-operative Arcadian Restaurant. After tea a most enjoyable concert was given by various well wishers of the blind, the artistes giving their services free. Each male blind person received either a packet of cigarettes or tobacco, and each female a box of chocolates, the gift of the Barnsley British Co-operative Society, Limited. The blind females also received a packet of tea, the gift of some well wishers. The Yorkshire Traction Co., Ltd., lent three motor coaches and members of the Rotary Club and other friends lent motor cars to convey blind persons in the scattered West Riding area to and from Barnsley. Gratitude and thanks are due to all who assisted in making this re-union such a happy and and outstanding event in the lives of our blind friends.

On the 27th June, 1933, a trip to Scarborough took place, each blind person again being allowed to take a relative or a friend as a guide. Over 300 blind persons and guides participated, being conveyed in eleven motor coaches supplied by Messrs. Edward Mills, Ltd. Several members of the Committee and the Officials of the Blind Welfare Department also accompanied the trip and spared no effort to make the outing a comfortable and enjoyable one. The weather was propitious. On arrival at Scarborough a substantial dinner was provided and, after a few hours by the sea, and visiting the various attractions, tea was provided. Everything went off without a hitch and credit is due to those who made and carried out the arrangements. Our blind friends are grateful for the pleasure given them, and wish to thank all concerned.

Our thanks are due to Scarborough Corporation for giving free access to the Marine Drive to all who accompanied the trip.

Thanks also are due to those voluntary helpers who did so much to make the event a memorable one in the lives of our blind friends.

In 1933, one blind male and three blind females were sent to Blackpool Sunbeam Home of Rest to recuperate after illness and received much benefit from the change of air, surroundings and diet.

At Christmas 1933, each registered blind person received a cash gift of 5/-.

Other forms of assistance have also been given during the year to various blind persons.

During the summer brass band concerts and other musical efforts were held on Sundays in Locke Park. The financial results were satisfactory and thanks are due to the general public for their patronage. Thanks also are due to the Parks Committee for placing the Park at the disposal of the Voluntary Committee for these efforts.

A successful Flag Day was held in Barnsley and grateful thanks are due to all helpers.

A colossal Whist Drive was held and helped to bring in funds so urgently needed to enable the Committee to provide social amenities, not otherwise available, to blind persons.

WIRELESS FOR THE BLIND.

During 1933, the remainder (24) of the 75 one valve earphone sets loaned by the 'British "Wireless for the Blind" Fund' were issued to blind persons in the care of the Department.

A further supply of sets has been received in 1934 and will be issued as soon as practicable.

The sets already supplied are much appreciated by the recipients and have brought much enjoyment and pleasure into their lives.

VACCINATION.

The list of Public Vaccinators is given on page 3.

415 children were successfully vaccinated during the year, and 864 statutory declarations of conscientious objection were received by the Vaccination Officer during the calendar year.

The Medical Officer performed one primary vaccination during the year under the Public Health (Smallpox Prevention) Regulations, 1917.

HEALTH EXHIBITION AND HEALTH PROPAGANDA.

The Health Week and Health Exhibition were held in the town from the 4th to the 8th April, 1933. The programme was organized by Mr. T. Crew, Organizing Secretary of the Central Council for Health Education in conjunction with the Local Health Department. Well attended lectures, illustrated by cinematograph films were given in the afternoon and evening and between twenty and thirty thousand people attended during the week.

APPENDIX.

BARNSELY 150 YEARS AGO

BARNSELEY 150 YEARS AGO.

I am greatly indebted to E. G. Bayford, Esq., F.R.E.S., of 38 Eldon Street, Barnsley, whose ingenuity has reconstructed, and whose generosity has enabled me to publish the following vital statistics of Barnsley for the years 1779 to 1797 inclusive.

The following notes from Mr. Bayford on the sources of his material are of interest:—

- (1) "The deaths, with age and sex, are derived from a tall, narrow, folio in vellum binding described as "A true copy of all the corps (sic) interred by me, William Strafford." William Strafford succeeded his father, George Strafford (buried 28-9-1778) as "Saxton" of St. Mary's Church. It would seem that almost at once he commenced to record his burials: No. 1 taking place 19-10-1778, and the last, No. 1530, 22-11-1798. This book passed successively into the hands of John Hewitt of Wakefield, a Leeds gentleman, a Leeds bookseller and Mrs. Alderman Gott of Leeds, who presented it to the Leeds Public Library. In February last it was loaned to our Public Library and was on exhibit throughout the month. During that time I made sufficient notes to enable the drawing up of the particulars from which the statistics were built up."
- (2) "In order to make statistics of use for comparison, I applied for a copy of your latest report and noted what Tables could be dealt with."
- (3) "As I am not aware of any record of population between 1750 and 1801, I had first of all to calculate the population for the years intervening. In fine, the book supplied the deaths, with age and sex. For the tabulation and all calculations, I am entirely responsible."
- (4) "For all practical purposes, the number of interments at St. Mary's is the number of deaths in Barnsley. The burial ground of The Society of Friends at Monk Bretton is the only one in existence during the entire period, at which it is possible some Barnsley friends may have been buried. The Independent Chapel, on Crow-well Hill was erected during the period, and I do not suppose that more than twenty corpses were buried in its yard during the 70 years it was in use."

Mr. Bayford points out the strong tendency of the figures to prove that people do not live any longer now than they did then, but that the average duration of life is much greater because of the reduction in deaths under five years of age. Further consideration of the figures is of profound interest. It will be noted that the town is now between twenty and twenty-five times as large as it was between 1779 and 1797. At that date the industrial revolution had not yet begun. Crompton invented the "mule," which was the foundation of the textile industry in 1779. The first railway between Liverpool and Manchester was opened in 1830, and, therefore, Barnsley 150 years ago was, presumably, of an agricultural nature but probably with some coal getting and linen manufacturing as well. Thus, whilst the general death rate in this period averaged 24.06, as against an average in 1931-32 of 12.9, only 19.1% of the deaths in these nineteen years were of children under one, compared with an average of 16.11% for the years 1922-31. As a contrast to this figure, Mr. Bayford points out that in 1871, when the effects of the industrial revolution and of coal getting were probably at their maximum, no less than 35.03% of the total deaths in the town occurred in children under one. On the other hand, the deaths of children under one, expressed as a death rate per 1,000 population, were, between 1779 and 1797, at the rate of 4.47, compared with only 1.71 in 1932, and the deaths of children under five averaged 9.46, compared with 2.36 in 1932. The good effects of modern sanitation and the profound influence which dietetic knowledge has had on ordinary life are thus clearly shown.

It is a great pity that William Strafford was not able to augment his record by some notes on the cause of death. Thus in 1783, 1788 and 1793, very definite epidemics are shown in children under five. These were almost certainly of an infective nature, either Diarrhoea or a Respiratory Infectious Disease such as Measles or Scarlet Fever. Similarly, in 1784, 1788 and 1789, a marked rise in the deaths of people over 55 is recorded. Speculation on the causes for this is bound to be less exact, but, again, some form of respiratory infection is probably indicated.

The figures are tremendously interesting and do show definitely that, following the ill-effects of the industrial revolution, modern sanitation and modern maternity and child welfare work have exercised a very noticable influence on both the well being and the survival of the community.

TABLE 66.

Year	Estimated Population	Total Births	Still Births	Per 1000	Deaths	M.	F.	Deaths per 1000	
1779	2628	69	5	1.90	64	24.35	Lowest Highest
1780	2666	63	3	1.12	60	.....	.....	22.50
1781	2704	56	4	1.47	52	22	30	19.23	
1782	2743	82	4	1.45	78	.....	.....	28.43
1783	2782	62	4	1.43	58	28	30	20.85	
1784	2822	71	6	2.12	65	28	37	23.03	
1785	2863	52	6	2.09	46	22	24	16.06	
1786	2904	63	8	2.75	55	23	32	18.93	
1787	2946	45	7	2.37	38	19	19	12.89	
1788	2988	130	3	1.00	127	68	59	42.50	
1789	3031	75	5	1.64	70	28	42	23.09	
1790	3075	60	10	3.25	50	27	23	16.26	
1791	3119	51	5	1.60	46	27	19	14.74	
1792	3164	57	6	1.89	51	24	27	16.11	
1793	3210	134	6	1.86	128	61	67	39.87	
1794	3256	91	8	2.45	83	44	39	25.49	
1795	3203	130	6	1.81	124	53	71	37.54	
1796	3351	77	9	2.68	68	26	42	20.29	
1797	3339	80	9	2.64	71	34	37	20.88	
Av. 1779-1797	2997.58	73.68	24.579	
Av. 1922-1931	71259	920	12.94	
1932	71900	849	471	378	11.80	

TABLE 67.

Year	Deaths at all ages	—1	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—	Age not stated
1779	64	13	3	11	4	3	1	4	4	2	11	7	1
1780	60	8	.....	3	.....	2	4	5	9	9	8	11	1
1781	52	6	3	.....	3	3	2	2	8	6	10	$\frac{3}{6}$	.....
1782	78	13	11	26	5	2	.....	3	4	2	6	6	.....
1783	58	13	3	10	5	.....	.....	5	8	6	.....	8	.....
1784	65	4	3	1	3	7	2	5	2	13	10	14	1
1785	46	12	2	1	6	1	5	3	3	2	5	3	3
1786	55	11	7	3	4	5	4	3	5	2	8	2	1
1787	38	10	2	2	.....	7	4	3	.....	5	2	$\frac{2}{1}$	.....
1788	127	20	13	20	7	8	9	6	7	16	7	12	2
1789	70	11	6	2	2	2	6	6	6	16	10	3	.....
1790	50	11	6	3	5	5	3	5	3	3	4	2	.....
1791	46	14	2	2	3	1	4	4	8	3	3	2	.....
1792	51	6	5	1	5	5	4	8	1	2	10	4	.....
1793	128	33	20	30	6	2	4	4	7	7	4	8	3
1794	83	21	8	10	3	9	3	4	2	6	6	11	.....
1795	124	16	19	27	12	.....	4	9	12	6	8	11	.....
1796	68	16	6	2	6	3	4	5	9	6	2	8	1
1797	71	17	6	5	6	5	5	6	3	4	9	5	.....

TABLE 68.

Year.	Total Burials.	Under 1 year of age.	Percentage of Total Deaths.		
			Under 1 yr	Over 1 yr.	
1779	64	13	20.31	79.69	Lowest
1780	60	8	13.33	86.66	
1781	52	6	11.53	88.46	
1782	78	13	16.66	83.33	
1783	58	13	22.41	77.58	
1784	65	4	6.15	93.84	
1785	46	12	26.08	73.91	
1786	55	11	20	80	
1787	38	10	26.31	73.68	
1788	127	20	15.74	84.25	
1789	70	11	15.71	84.28	Highest
1790	50	11	22	78	
1791	46	14	30.43	69.56	
1792	51	6	11.76	88.23	
1793	128	33	25.78	74.22	
1794	83	21	25.30	74.70	
1795	124	16	12.90	87.10	
1796	68	16	23.53	76.47	
1797	71	17	23.94	76.05	
Av. 1779-1797	70.21	13.42	19.11	80.88	
Av. 1922-1931			16.11		
1871			35.3		
1932			14.48		

TABLE 69.

Year.	Total Burials.	Under 5 years.	Percentage of Total Deaths.		
			Under 5 yrs.	Over 5 yrs.	
1779	64	27	42.18	57.81	Highest
1780	60	11	18.33	81.66	
1781	52	9	17.31	82.69	
1782	78	50	64.10	35.90	
1783	58	26	44.83	55.17	
1784	65	8	12.31	87.69	Lowest
1785	46	15	32.61	67.39	
1786	55	21	38.18	61.81	
1787	38	14	36.84	63.16	
1788	127	53	41.73	58.27	
1789	70	19	27.14	72.85	Just below highest
1790	50	20	40	60	
1791	46	18	39.13	60.87	
1792	51	12	23.53	76.47	
1793	128	82	64.06	35.94	
1794	83	39	46.98	53.01	
1795	124	62	50	50	
1796	68	24	35.29	64.70	
1797	71	28	39.43	60.56	
Av. 1779-1797	70.21	28.31	40.32	59.67	
Av. 1922-1931			26.58		
1932	849	172	20.25	79.74	

TABLE 70.

Stillborn Children.

Total for 1779 to 1797 inclusive 114; an average of 6 per year; i.e., a rate of 2 per 1,000 population.

In 1932 64 are recorded; i.e., a rate of 0.89 per 1,000 population.

Children under 1 year.

Total deaths for 1779 to 1797 inclusive 255; an average of 13.42 per year; i.e., a rate of 4.47 per 1,000 population.

In 1932 123 are recorded; i.e., a rate of 1.71 per 1,000 population.

Children under 5.

Total deaths for 1779 to 1797 inclusive 539; an average of 28.37; i.e., a rate of 9.46 per 1,000 population.

In 1932 172 are recorded; i.e., a rate of 2.36 per 1,000 population.

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